Minority ethnic prisoners’ experiences of rehabilitation and release planning

A thematic review
by HM Inspectorate of Prisons

October 2020
2 Minority ethnic prisoners’ experiences of rehabilitation and release planning

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Glossary of terms

We try to make our reports as clear as possible, and this short glossary should help to explain some of the specialist terms you may find. If you need an explanation of any other terms, please see the longer glossary available on our website at: http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/

**Changing Lives**
A charity that supports people in prison through to the community. It provides rehabilitation programmes in prisons and a range of services, including housing and employment in the community. See: https://www.changing-lives.org.uk

**Hibiscus Initiatives**
A charity that aims to support vulnerable foreign nationals, black and minority ethnic people and refugees affected by the criminal justice and immigration systems. Hibiscus Initiatives works mainly with women prisoners and immigration detainees, and targets support to those who may be marginalised by language and cultural barriers. The charity also helps people transition from prison or immigration detention into the community in the UK or other countries. See: https://hibiscusinitiatives.org.uk/project/prison-services/

**LEAP**
A charity that provides conflict management programmes and support to young people and the professionals working with them. The charity has developed bespoke training for a number of prisons in England and Wales. See: https://www.leapconfrontingconflict.org.uk/

**NOMIS**
Prison information recording system which allows staff to record electronic case notes. This information can be shared both within an establishment and nationally.

**OASys**
Offender assessment system (assessment system for both prisons and probation, providing a framework for assessing the likelihood of reoffending and the risk of harm to others).

**Offender Management in Custody (OMiC)**
The Offender Management in Custody (OMiC) model has been implemented in two phases across the closed male prison estate. The first phase entails prison officers undertaking key work sessions with prisoners and was implemented during 2018–19. The second phase, case management, was introduced on 1 October 2019 and is still being rolled out. It established the role of the prison offender manager (POM).

**Resolve**
Resolve is an offending behaviour programme designed to address violent offending. It is suitable for adult men with a medium to high risk of reoffending and is delivered both in groups and individual sessions.

**St Giles Trust**
A charity that provides support, advice and training for people affected by poverty, exploitation, abuse, addiction, mental health and those caught up in crime. The charity works in a number of prisons across England and Wales providing resettlement services and access to a Peer Advisor Programme. See: https://www.stgilestrust.org.uk/
Introduction

Black and minority ethnic (BME) groups are greatly overrepresented in the prison population: as of March 2020, 27% of prisoners were from a BME background, compared with only 13% of the general population. People who identify as ‘black’ are imprisoned at an even more disproportionate rate: they comprise only 3% of the general population but 13% of adult prisoners (UK Prison Population Statistics, 2020).

HM Inspectorate of Prisons (HMI Prisons) inspection reports consistently show that BME prisoners report worse experiences and outcomes than white prisoners across a wide range of indicators covering most areas of prison life. The Lammy Review (published in 2017 and subtitled ‘An independent review into the treatment of, and outcomes for, Black, Asian and Minority Ethnic individuals in the Criminal Justice System’) drew extensively on HMI Prisons’ evidence and other sources to highlight under-identification of BME prisoners’ vulnerabilities, widespread feelings among BME prisoners of being treated less well than white prisoners and shortcomings in important systems of redress and internal assurance. People from a BME background have less trust in the criminal justice system than white people and worse perceptions of the system’s fairness, whether or not they have had any significant involvement in it (Lammy, 2017). The reasons for these perceptions are complex and under-researched, and result not just from criminal justice processes, but also from long-term patterns of social inequality and prejudice (Bhui, 2009).

Developing a greater understanding of the perceptions of prisoners and disproportionalities in the prison system, and finding ways to address them, is an important task for those working in prisons. This thematic review is a small but original contribution to that effort. We will consider carefully how the findings might be built upon in future work. Little has been written on BME prisoners’ experiences of offender management and resettlement services, and there is very limited work on the increasingly influential concept of ‘rehabilitative culture’ and the degree to which efforts to achieve it have taken account of the specific experiences of BME prisoners.

The Lammy Review also highlighted the recurrent problem of a lack of data on Gypsy, Roma and Traveller (GRT) prisoners in prisons, which limits understanding of potential problems. We know that GRT prisoners are greatly overrepresented in prisons, while distinctive needs they may have are not well identified or addressed. The experiences of this group are therefore included in this review, although, as is made clear, poor identification of GRT prisoners limited the number that we were able to interview.

Rehabilitation and release planning is not a well-understood area for any prisoners, in part because systems for supporting rehabilitation have been in flux for several years. Procedures for assessing prisoners’ risks and offending-related needs, managing sentence progression and helping them to prepare for release have been subject to regular reform and changes in practice. Most notably, a new offender management in custody (OMiC – see Glossary of terms) model is currently being rolled out across the prison system (HMI Prisons, 2020) and the outsourcing of pre- and post-release services to community rehabilitation companies (CRCs) is being largely phased out in favour of a more unified service provided by the National Probation Service (see Strengthening Probation, Building Confidence, https://www.gov.uk/guidance/strengthening-probation-building-confidence).

This review provides insights into BME and GRT prisoners’ experiences of rehabilitation and release planning in this changing environment. It seeks to expand the very limited current evidence on their experiences of rehabilitation and release planning, largely using prisoner surveys and verbal accounts from prisoners and key staff. It explores the extent to which the distinct needs of BME and GRT prisoners are being identified and met; responsive services which reflect individual needs are essential to building a criminal justice system in which BME communities can have greater confidence (Ministry of Justice, 2020).
Inspectors gathered a wide range of evidence from analysis of nearly 7,000 prisoner surveys and fieldwork in eight prisons. During the eight prison visits, they completed semi-structured interviews with 73 BME prisoners, nine GRT prisoners and 64 key prison staff and managers working in roles intended to support rehabilitation and release planning. They also undertook group interviews with prison managers in all establishments, attended some prisoner group meetings and spoke to some individual prisoners more informally about their experiences. We have identified individual ethnicities of prisoner interviewees throughout the report. Where the data were strong enough to compare experiences of different minority groups, we have done so; but where this was not the case, we have focused on reporting the collective experiences of BME or GRT prisoners.

Throughout this project, we have been acutely aware that there are considerable problems with using collective terms such as ‘black and minority ethnic’. Such descriptions imply a false homogeneity of experience between culturally different minority groups, and will always understate the uniqueness of each of them. We have therefore taken some time to explain our use of terminology and the reasons for the scope of this report in Section 2. In essence, we have chosen to focus on the commonalities of experience between minority groups in order to provide a broad initial evidence base to help fill an existing gap.

It is important to state at the outset that we consider this review a starting point for more sophisticated and granular analyses that will be required to help improve our understanding of the complexity of human experiences and identities. The lack of a sufficiently wide range of data held by HM Prison and Probation Service (HMPPS) relating to both participation and outcomes in activities, rehabilitative work and release planning became increasingly clear during our fieldwork. Addressing this problem is a challenge that we set out to HMPPS in our recommendations.

This thematic review identifies positive practices which can provide direction for system-wide reforms. For example, the fact that minority ethnic women at HMP New Hall felt included in the prison’s rehabilitative culture is worthy of further exploration. We also identify specific programmes and support for BME and GRT prisoners which were valued by prisoners and staff alike. Our findings demonstrate how specialist voluntary sector organisations in particular can help BME and GRT prisoners to feel more included in rehabilitative work and to engage more effectively in pre-release processes.

Inspectors also noted several important ways to initiate, and improve, trusting relationships between staff and prisoners. These included resolving practical issues, behaving consistently, motivating prisoners by recognising their strengths and abilities and implementing personalised, methodical approaches to deliver rehabilitation and preparation for release. These points apply to prisoners from all backgrounds. However, one of the most significant findings of this review is the considerable gap between BME prisoners and prison staff in their understanding of how ethnicity influences rehabilitation and resettlement. While about a third of interviewed BME prisoners felt that their ethnicity had a significant impact on their experience, almost no staff felt the same. Increasing mutual understanding of this problem is a critical task if the relationships which form the bedrock of rehabilitative culture are to be nurtured. We found that the concept of rehabilitative culture currently held little meaning for BME prisoners, even where staff thought that this was what they were delivering.

This review provides a small number of recommendations, but they will require considerable effort to implement. In particular, we suggest that there needs to be a reimagining of what rehabilitative culture means and how it can be better communicated and delivered, as well as a frank assessment of how experiences of prejudice and discrimination affect the promise of rehabilitative culture for minority ethnic prisoners.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons
October 2020
Section 1. Key findings

1.1 Prison staff underestimate the influence of ethnic identity on rehabilitation. About one third of interviewed male and female BME prisoners reported that their ethnicity had directly influenced their experience of rehabilitation and release planning (RRP). Prisoners referred to a lack of understanding about their cultural backgrounds and differences, the lack of diversity of prison staff, previous experiences of discrimination in prison and unfair access to jobs. We concluded that staff had insufficient understanding of BME prisoners’ distinct experiences of prison life, and how ethnicity might influence their engagement with rehabilitative work. In our interviews, almost no staff considered that ethnicity had an impact on BME prisoners’ RRP experiences.

1.2 Not enough was being done to improve communication with BME prisoners. Attempts to understand the distinct perspectives of BME prisoners were largely unimaginative and ineffective. For example, we found a dearth of regular group meetings that promote dialogue, discussion and mutual understanding between staff and prisoners (as opposed to small ‘consultation’ groups that involve only a small number of prisoner representatives). Where we found group meetings with a broader scope taking place in the fieldwork prisons, they were for Travellers, usually supported by external agencies, and were considered valuable by both prisoners and staff.

1.3 The common elements of what has become known as ‘rehabilitative culture’ (see paragraph 2.13) were less meaningful for male BME prisoners than for white prisoners. When asked whether they felt their prison had a ‘rehabilitative culture’ (which supports rehabilitation by being safe, decent, hopeful and supportive of change), most interviewed prisoners in closed establishments did not think that it did. This applied even in a closed prison where we considered the elements of rehabilitative culture to be generally strong (HMP Buckley Hall). Male BME prisoners tended to describe relationships with staff that were experienced through the lens of discipline and control, rather than ones that were supportive of efforts towards change and rehabilitation. They also told us that their experiences of discrimination within prisons negatively affected their views of rehabilitative culture.

1.4 In our survey, male BME prisoners reported poorer experiences than white prisoners about the range of factors commonly thought to be necessary for a rehabilitative culture to exist. Male BME prisoners reported more negatively than white prisoners across most areas of prison life relating to staff treatment, including relationships with staff, victimisation by staff, experiences of behaviour management, disciplinary procedures, complaints, time out of cell and support to achieve resettlement objectives. Moreover, they were less likely to report personal vulnerabilities such as mental health problems, drug and alcohol misuse problems, being on an assessment, care in custody and teamwork (ACCT) review for those at risk of suicide or self-harm, having a disability or being victimised by other prisoners. Such differences were generally less pronounced in the women’s prisons, especially in HMP & YOI New Hall, where BME women were largely positive about the prison’s rehabilitative potential and cited good relationships and staff encouragement as particularly important.

1.5 There was little evidence that staff understood how experiences of prejudice and discrimination affected the promise of rehabilitative culture for BME prisoners. BME prisoners were not actively involved in defining and refining the concept of rehabilitative culture in their establishments. As inclusion and a focus on dialogue between staff and prisoners are essential to the development of a rehabilitative culture, it must be enabled and encouraged; it cannot be imposed or required. If it is, there is a higher likelihood of the views and needs of minority ethnic prisoners being relegated in importance within a dominant group narrative. We found no examples of prison managers inviting input from
diverse prisoner groups about what a rehabilitative culture would mean to them, in that establishment.

1.6 Male BME prisoners valued the practical help given by key workers but there was too little support with sentence planning and rehabilitation. In our survey, male BME prisoners were less likely than white prisoners to report that any member of staff was helping them to achieve their sentence plan targets. Interviewed male BME prisoners valued the practical support given by key workers and often described generally positive relationships with them. However, key work was rarely focused on sentence planning and rehabilitation. In the small number of cases where we saw evidence of effective key work with BME prisoners, relationships appeared to be built on trust, professional working relationships and positive reinforcement. Prisoner offender manager (POM) contact with BME prisoners was infrequent, often superficial and reactive.

1.7 BME and GRT prisoners had low expectations of rehabilitation and release support, but their perceptions about the support they were receiving were still better than the RRP support actually provided. Our case file assessments showed that rehabilitation and release support provided to male BME and GRT prisoners was often insufficient or poor. However, while some prisoners explained their concerns about this in detail, many appeared to expect little more and, indeed, most told us they had been treated fairly.

1.8 BME prisoners valued and wanted more access to purposeful activity and rehabilitative opportunities. In our surveys, BME prisoners were less likely than white prisoners to say that it was easy to get access to purposeful activity, and less likely to say that staff encouraged them to attend activities. However, they were more likely to be actually involved in these activities. BME prisoners therefore appeared to be taking advantage of opportunities for education, work and vocational training, but they did not feel as encouraged or supported to do so. They were also more likely to feel that the activity would help them on release. Our interviews supported these findings: BME prisoners had a strong appetite for prison education, training and work, were dissatisfied at not having as much opportunity to engage in it as they would have liked and ascribed this in part to discrimination.

1.9 In our survey, BME prisoners were more likely to report having release on temporary licence (ROTL) opportunities than white prisoners. In our interviews, most described how helpful these opportunities were in maintaining family ties and supporting education, training and employment opportunities in the community. Similarly, BME prisoners were more likely to report completing offending behaviour programmes and most of those we spoke to who had completed the programmes said they been helpful.

1.10 BME prisoners reported less access to family support than white prisoners. In our survey, BME prisoners reported more negatively than white prisoners across a range of family support questions, and only a small proportion felt they were encouraged by staff to maintain important relationships. In our interviews, prisoners described the benefits of in-cell telephones. However, they complained about what some felt was the discriminatory impact on family contact of unfair incentives and earned privileges (IEP) schemes, which allow more visits for those on the enhanced level.

1.11 There was insufficient use of data to understand access to activities and rehabilitative interventions. Perceptions of inconsistent and discriminatory treatment regarding access to activities, disciplinary measures and rehabilitative provision such as ROTL were widespread among BME prisoners. Such perceptions could usefully have been explored through rigorous prison equality monitoring to identify potential disparities, provide maximum possible transparency in decision-making and initiate strong, consistent communication with prisoners to understand and address their concerns. While some, generally out of date, monitoring data were collected at all prisons, we found little use of rehabilitation or release planning data broken down by ethnicity to help identify and address concerns. This was partly
because relevant data was rarely collected or collated, and partly because, when it was, it was held in a variety of locations – by prison managers, agencies working in the prison or centrally by community rehabilitation companies (CRCs) – and not shared.

1.12 An important point for managers to consider is that even if such data broken down by ethnicity had been available and showed no disproportionality, there was some evidence that a lack of trust in staff among BME prisoners may have led them to disregard information that did not chime with their personal experiences. Considerable prior work appeared necessary to demonstrate institutional commitment to equality and to build trusting relationships between prison staff and BME prisoners.

1.13 There was little dedicated rehabilitative work, but where it existed it was valued. We found some promising support and programmes for BME and GRT prisoners, which were designed to meet their specific needs and recognised the importance of ethnic identity. Staff and prisoners praised the tailored challenge and support that these agencies and interventions provided to specific ethnic groups. In particular:

- The ‘Changing the Game’ programme addressed offending behaviour among young black men with a programme designed to be culturally sensitive (see paragraph 5.16).

- The ‘Traveller Resettlement Project’ provided pre- and post-release support for Gypsies and Travellers in men’s and women’s prisons (see paragraph 7.20).

- ‘Muslim Women in Prison’ (MWIP) provided cultural and language support to prisoners as well as help with resettlement (see paragraph 6.9).

- ‘Hibiscus Initiatives’ (see Glossary of terms) provided rehabilitation and resettlement support specifically for BME women, including advocacy services for BME refugees and foreign nationals. Support was directed to those who might be marginalised by language and cultural barriers.

Such programmes and support illustrated the value of specialist voluntary sector resources in encouraging BME and GRT prisoners to engage effectively with rehabilitation and pre-release work.

1.14 BME female prisoners tended to report similarly to white female prisoners but were more negative about access to activities. In our survey, BME female prisoners reported similar experiences to white female prisoners in most areas, including relationships. They were more negative in some areas, notably in relation to levels of victimisation from staff and access to activities. In our interviews, BME women described adequate contact with POMs but did not find it sufficiently focused on rehabilitation or release planning. Fewer than half of BME women said that staff were supporting them to achieve their sentence plan objectives. The key working element of the new offender management in custody model (OMiC – see Glossary of terms) was paused in women’s prisons in March 2020 as a result of the COVID-19 pandemic; however, one of the sites (HMP & YOI Bronzefield) had implemented an interim model of key work and case management for some prisoners (HM Prison and Probation Service, 2018).

1.15 GRT prisoners were poorly identified and this undermined all further attempts to provide them with culturally appropriate services. A lack of accurate data on GRT prisoners was common in all prisons. At one prison, we found that of the 10 apparently GRT prisoners we sought to interview, details for all had been inaccurately recorded; in fact, none were from a GRT background. Male GRT prisoners received limited proactive support from POMs and infrequent contact. GRT prisoners were more likely to report needing help to get in touch with family and friends while in custody compared to other prisoners. There was little strategic focus on GRT prisoners. Most GRT prisoners found offending behaviour
programmes to be helpful. At some sites, it was positive that interventions were adapted to meet the needs of GRT prisoners. Female GRT prisoners were more likely than other groups of prisoners to describe complex needs, to report feeling unsafe, and to say they had experienced victimisation from other prisoners.
Section 2. Background to the report

Terminology and scope

2.1 There are a number of collective terms for describing minority ethnic populations. The most common are ‘black and minority ethnic’ (BME) and ‘black, Asian and minority ethnic’ (BAME). Other terms include ‘people of colour’, which is commonly used in the USA, and ‘visible minorities’. All of these descriptions emphasise skin colour and the fact that it is often how people are singled out for racist victimisation. All have also been subject to criticism, generally for two reasons: because they falsely imply a homogenous identity for diverse groups with varied cultural identities; and because the broad term does not give sufficient recognition to some of the smaller groups within.

2.2 These critiques are undoubtedly valid. There is much utility in looking at minority group experience as a whole because of the broad lessons that can be learned about majority group assumptions, and about the nature of prejudice and discrimination against people who are different. However, there are inevitable shortcomings in using collective terms that imply commonalities of experience between diverse groups of people on the basis that they are minorities. Indeed, even an analysis of a single ethnic group will reveal considerable differences as ethnicity is intersected by other aspects of identity such as gender and age. In opting to encompass many minority ethnic groups in a broad analysis, this thematic review has not avoided this analytical problem, although we separately consider the experiences of women, and have drawn out differences between ethnic groups where we found sufficient, triangulated evidence to do so. We have chosen to focus on the commonalities of experience between minority groups to provide a broad initial evidence base to help fill an existing gap; but we consider this review a starting point for more sophisticated and granular analyses that will be required to help improve our understanding of complex human experiences and identities.

2.3 ‘Gypsy, Roma and Traveller’ (GRT) is similarly a contested collective term used to describe groups which, despite their distinct ethnicities, have in common a traditionally nomadic lifestyle. In continental Europe, ‘Roma’ encompasses all groups with nomadic histories, but this is not a term commonly used by British communities (House of Commons Women and Equalities Committee, 2019). Most of the prisoners in this category that we interviewed identified themselves as ‘Travellers’. As there is increasing evidence of disproportionality and potential discrimination in relation to GRT prisoners, we have given them specific attention in this report.

2.4 The term ‘minority ethnic’ is broad and may include groups with visible difference and those with GRT heritage. ‘Visible difference’ was the focus of a previous HMI Prisons report, Parallel Worlds: A thematic review of race relations in prisons. That report noted that a previous Chief Executive of the National Offender Management Service, Martin Narey, felt that ‘the default option for racism remains colour’ (HMI Prisons, 2005: 5). In this report, we use the terms ‘minority ethnic’, ‘black and minority ethnic’ and ‘Gypsy, Roma and Traveller’ and abbreviate them to BME and GRT to enable easier reading. We remain aware of the limitations of each collective description but consider there is enough value to make use of them.
Aim of this thematic review

2.5 This review set out to gather evidence that could help to develop understanding of prison-based rehabilitation work and rehabilitation and release planning (RRP) outcomes for BME and GRT prisoners. It considered the following key questions:

- How do BME and GRT prisoners experience RRP?
- How do prison-based staff identify and respond to any distinct needs that BME and GRT prisoners may have?
- Is there evidence of differential treatment of BME and GRT prisoners or, conversely, of equitable outcomes and/or innovative practices?
- What are the implications of our findings for HM Prison and Probation Service’s (HMPPS) strategic approach to RRP work?

Existing evidence on BME prisoners

2.6 The overrepresentation of BME people in the prison population is a long-established concern; the last census in 2011 showed that about 13% of the general population was from a BME background, but that they comprised 27% of the prison population (UK Prison Population Statistics, 2020). Those identifying as black are especially overrepresented: as of 2017, 12% of prisoners are black but they comprise only 3% of the general population (Lammy, 2017).

The Lammy Review, which drew partly on HMI Prisons survey data, brought renewed attention to this imbalance. That report highlighted several areas of concern in relation to BME prisoners’ experiences, including, for example, the fact that they are less likely to be identified as having learning difficulties or mental health concerns on reception, that systems of redress such as discrimination incident reports are weak and that there is inadequate governance surrounding key aspects of prison life, such as the incentives and earned privileges (IEP) scheme, which BME prisoners report impact on them disproportionately. The report also noted that ‘[T]he lack of diversity among prison officers, including prison leadership, helps perpetuate a culture of “us and them” with BAME prisoners. It contributes to an atmosphere in which many rebel against prison regimes, rather than start on the road to a life without offending’ (Lammy, 2017: 45).

2.7 We know that use of release on temporary licence (ROTL) placements provides prisoners with the opportunity to prepare for their life post-custody: the greater the accessibility and availability of ROTL, the greater the chance ex-prisoners have of effectively reintegrating back into their community (Hillier and Mews, 2018). A 2016 paper published by the Ministry of Justice (Black, Asian and Minority Ethnic disproportionality in the Criminal Justice System in England and Wales) found that BME prisoners were less likely to experience ROTL than white prisoners (Ministry of Justice, 2016).

2.8 A Ministry of Justice evidence assessment (2018) concluded that there was insufficient evidence relevant to understanding how to improve rehabilitative services and outcomes for BME prisoners (Shingler and Pope, 2018). However, it identified some studies which suggested that treatment that is ‘culturally aware, sensitive and inclusive; that is delivered by culturally aware and sensitive staff; and delivered by staff from similar ethnic backgrounds to their clients’ (Shingler and Pope, 2018: 2) was more likely to engage BME participants. It also highlighted barriers to effective treatment that could interfere with BME offenders starting, completing or engaging in treatment, including ‘experiences or fear of racism or discrimination, and the perception and possible reality that the intervention will not be culturally relevant’ (Shingler and Pope, 2018: 2). The study suggested that ‘recognising and
encouraging cultural identity could be a promising approach to facilitating greater responsivity’ (Shingler and Pope, 2018: 2).

2.9 HMI Prisons surveys show that BME women feel less safe in custody and report worse access to mental health support than white women. However, there is limited research available on BME women and rehabilitation and release planning. The second review by Lord Farmer (2019), which focused specifically on women, showed female prisoners’ most prevalent area of ‘criminogenic need’ was relationships; that is, problems with relationships significantly affect women’s likelihood of reoffending (Farmer, 2019). Despite this finding, the review did not consider ethnicity. Other research has shown significantly reduced levels of reoffending among former prisoners who reported relationships with their families had strengthened during their sentence (Brunton-Smith and McCarthy, 2016).

Existing evidence on GRT prisoners

2.10 The term ‘GRT’ includes a variety of groups, all with different histories, cultures and beliefs (Cromarty, 2019). In HMI Prisons’ adult surveys published between 1 April and 31 March 2020, 5% of all prisoners self-identified as either Gypsy, Roma or Traveller, a figure that has remained relatively stable over the previous 10 years. Establishing the number of GRT people in the UK is difficult because of the variation in definitions and data collection methods over time. However, there is little doubt that those identifying as GRT are significantly overrepresented in the prison population. In the 2011 UK census, just 0.1% of people (fewer than 60,000) were identified as Gypsy or Irish Traveller. This figure is widely acknowledged to be an underestimate, and the highest estimates using other sources put the proportion of Travellers and Gypsies at between 0.2% and 0.5% (i.e. 300,000) of the UK population (ONS 2014; see also The Traveller Movement website: https://www.travellermovement.org.uk/about/gypsy-roma-traveller-history-and-culture). There was no category of ‘Roma’ in the 2011 census and it is therefore even more difficult to obtain reliable figures on that group. However, using various sources which may have combined Roma and other travelling groups, the Council of Europe reports the number of Roma in the UK to be around 225,000 (0.36%) and gives a maximum figure of 300,000 (Council of Europe 2012). Therefore, the very highest estimates of GRT people in the UK put their numbers at around 0.6 million, which equates to around 0.9% of the population, well below the 5% figure consistently suggested by HMI Prisons data.

2.11 HMI Prisons repeatedly finds variance between prison records and those who self-identify as GRT in confidential prisoner surveys. For example, in our 2019 inspection at HMP Pentonville, 5% of prisoners who completed our survey reported that they were from a travelling community, a term that includes those who identify as GRT. However, the prison had recorded only 12 GRT prisoners, amounting to only about 1% of the prison’s population.

2.12 It is therefore unsurprising that the distinctive needs of GRT prisoners are generally not identified or addressed in a systematic way. Inspections normally find that equality strategies are in place, but rarely specific needs analyses, focusing on GRT prisoners. This finding is echoed by the limited research that has been undertaken on GRT prisoners (Mac Gabhann, 2013). The distinctive rehabilitation-related concerns and needs of GRT prisoners, such as access to interventions, release planning and the ability to maintain contact with family and friends, are largely unexplored. All have been given some attention in the planning for this thematic review.
Rehabilitative culture

2.13 Staff-prisoner relationships are at the heart of the offender management in custody model (OMIC – see Glossary of terms), which aims to promote desistance from offending through two distinct but interconnected parts: key work and case management. Case management involves prison offender managers (POMs) building relationships with prisoners allocated to them through one-to-one supervision. The aim of key work is to develop constructive, motivational relationships with prisoners, support them to make appropriate choices and give them hope and responsibility for their own rehabilitation. HMPPS expects governors in the male closed estate to ensure that time is made available for an average of 45 minutes per prisoner per week for delivery of the key worker role. Key workers are expected ‘to provide a responsive service, reflecting individual need and stage in the sentence’ (HM Prison and Probation Service, 2018: 9). The Lammy Review (2017: 50) noted:

‘[...] the way individuals are treated in prison affects their chances of rehabilitation in tangible and intangible ways. Tangibly, access to opportunities like training courses, prison jobs and behaviour management programmes affects offenders’ ability to cope without reoffending when they leave prison. Intangibly, the extent to which prisoners believe they are treated fairly in prison has proven links both to their behaviour in custody and their likelihood of reoffending once released.’

2.14 In a progress report to its response to The Lammy Review, the Ministry of Justice noted that perceptions of transparency, fairness and trust affect the well-being and rehabilitation of all prisoners and have particular implications for those who are from BME backgrounds.

2.15 Mann, Fitzalan Howard and Tew (2018: 8) define a rehabilitative culture as:

‘[...] one where all the aspects of our [i.e. prison] culture support rehabilitation; they contribute to the prison being safe, decent, hopeful and supportive of change, progression and to helping someone desist from crime. The aim is for everyone to feel safe from physical and verbal violence and abuse, for prisons to be places of decency, where everyone treats each other with respect, and people’s basic needs are understood and met [...] relationships between prison staff and the people in their care are the cornerstone of a rehabilitative culture.’

2.16 The focus of this approach is on long-term rehabilitation instead of short-term compliance, which is often achieved through punishment. Mann, Fitzalan Howard and Tew (2018) argue that compliance measures such as the IEP scheme are mostly ineffective in changing behaviour in the long term.

2.17 HMI Prisons reports have occasionally found good examples of a developing rehabilitative culture which motivates prisoners to engage in the opportunities that prisons may provide to create positive change (for example, HMP Buckley Hall (2019); HMP Brixton (2019)). At HMP Brixton, prisoners met newly appointed staff to tell them about their experiences and concerns; this symbolised the importance given to prisoners’ views by the prison and helped to create positive relationships from the outset.

2.18 By contrast, very little is known about BME and GRT prisoners’ experiences of rehabilitative culture. This thematic seeks to address that gap.
Section 3. Methodology

3.1 This report draws on a range of evidence, including:

- Prisoner surveys undertaken with 6,155 men and 685 women, which were published in inspection reports between 1 April 2019 and 31 March 2020. The results were broken down by ethnicity and were made available to inspectors in advance of the fieldwork visits.

- An analysis of inspection reports published between 1 April 2019 and 31 March 2020.

- Analysis of case files for 172 prisoners.

- Structured interviews with 73 BME and nine GRT prisoners during fieldwork visits from January to February 2020.

- Structured interviews with 64 individual prison staff, mainly key workers and prison offender managers (POMs), during the same time period.

- Group interviews with managers involved in rehabilitation and release planning (RRP) delivery in each of the eight prisons during the same time period.

- Additional data collection from the eight prisons during the fieldwork visits, including, for example, ethnic monitoring data and minutes of consultation groups.

3.2 The eight fieldwork prisons were chosen to represent a range of different functional types and diversity of prisoner populations. We visited two prisons for adult women, two open prisons, two category C prisons, one local prison and one prison where 22% of the population were young adults.

3.3 Evidence from all sources was triangulated to strengthen the validity of judgements. The methodology is outlined in brief in this chapter and further details are included in Appendix 1).

Case file analysis

3.4 The case file analysis included 172 files for both white/non-GRT and BME/GRT prisoners. These comprised 80 case files for white/non-GRT prisoners, 79 for BME prisoners (62 men and 17 women) and 13 GRT prisoners (10 men and three women). Prisoners were sampled to ensure diversity across different characteristics; ethnicity, age, offence type, sentence length and release date.

3.5 As part of the case file analysis, information was extracted from NOMIS and OASys (see Glossary of terms) and covered the following areas:

- demographic/background information

- relationships and contact with the outside world

- contact and RRP support from key staff (key workers, POMs, offender supervisors)

- interventions to address identified criminogenic need
• other sentence areas (release on temporary licence (ROTL), home detention curfew (HDC))

• release planning

• risk levels.

3.6 An overall assessment of the management of each case was also made by inspectors (poor, not sufficiently good, reasonably good and good).

Interviews with BME and GRT prisoners

3.7 Individual interviews with 82 BME and GRT prisoners were undertaken, comprising 73 BME prisoners (56 men and 17 women) and nine GRT prisoners (seven men and two women). Inspectors asked prisoners for their overall assessment of RRP provision at the establishment, including their assessment of the rehabilitation culture and the influence of ethnic identity on their experience of RRP in the prison.

3.8 Interviews were not conducted with all BME/GRT prisoners for whom a case file review was completed as some prisoners had left the establishment before the fieldwork took place or declined to participate in an interview. The interviews covered the same core areas as the case file analysis, but prisoners were also asked to comment on the following:

• an overall assessment of RRP provision at their establishment including their assessment of the rehabilitative culture

• the influence of ethnic identity on their experiences of RRP in the prison.

Interviews with key workers and POMs

3.9 Individual interviews were conducted with 64 individual members of staff (51 in male establishments and 13 in female establishments). Some POMs or key workers were interviewed about multiple prisoners that they worked with. The interviews covered the same core areas as the case file analysis, but, as with prisoners, staff were also asked to comment on the following:

• an overall assessment of RRP provision at their establishment, including their assessment of the rehabilitative culture

• their views on how the prisoner’s ethnicity may have influenced their experience of RRP in the prison.

3.10 All data from the case file reviews and interviews with prisoners and staff were recorded on spreadsheets and overall judgements were made about the management of each case. Thematic analysis of this data was conducted to draw out themes.
Group interviews with leaders and managers in each establishment

3.11 Group interviews were undertaken with leaders and managers involved in the delivery and oversight of RRP services for prisoners in each of the eight prisons we visited. The aim was to help identify any specific interventions or areas for improvement in providing RRP services to BME and GRT prisoners.

Other evidence

3.12 We sought opportunities to gather further evidence while carrying out fieldwork. For example, we attended a Travellers meeting convened in one prison which held such groups regularly, and we interviewed representatives of community groups working in prisons.
Section 4. Black and minority ethnic male prisoners’ experiences of relationships with key staff

Summary

4.1 Male BME prisoners were more likely to report poorer and less constructive relationships than male white prisoners. They specifically mentioned concerns such as a lack of trust, a lack of help to meet sentence plan objectives and a punitive attitude from staff.

4.2 Prisoners valued the practical support given by key workers and often described generally positive relationships with them. However, key work was insufficiently focused on sentence planning and rehabilitation, and BME prisoners were less likely than white prisoners to report that any member of staff had spoken to them about their progress.

4.3 Prison offendor manager (POM) contact with BME prisoners was infrequent and often superficial and reactive. A lower proportion of BME than white prisoners reported that any member of staff was helping them to achieve their sentence plan targets. BME prisoners generally reported that their POM was fair, but most had low expectations of what the role should deliver.

BME prisoners’ experience of relationships with key staff

4.4 There is a great deal of research evidence that demonstrates the value of positive relationships to desistance from offending (Ministry of Justice Analytical Services, 2014). It is also accepted that ‘relationships between prison staff and the people in their care are the cornerstone of a rehabilitative culture’ (Mann, Fitzalan Howard and Tew, 2018: 8). This thematic review therefore examined BME prisoners’ relationships with key staff in detail.

4.5 In our survey, BME prisoners reported poorer and less constructive relationships with prison staff across a range of questions than white prisoners. While 63% of male BME prisoners said that most staff treated them with respect, this was significantly worse than the finding for white prisoners, 75% of whom felt respected by most staff. BME prisoners were also less likely than white prisoners to say that staff had encouraged them to go to education, training or work (51% compared with 59%).

Rehabilitative work, incentives schemes and disciplinary procedures

Incentives schemes

4.6 BME prisoners were more likely than white prisoners to experience relationships with staff that were disciplinary, rather than rehabilitative, in nature. Existing evidence shows that BME prisoners are more likely to be on the basic level of the incentives and earned privileges (IEP) scheme and more likely to be subjected to punitive disciplinary action. HM Prison and Probation Service (HMPPS)’s own equalities monitoring data found that on 31 March 2019,
the proportion of prisoners on the lowest level of the IEP scheme was highest for Mixed and Black (9%) or Black British (8%) prisoners; this compares with 5% of prisoners who identified as White and Asian and Asian British (Ministry of Justice, 2019) (see also paragraph 2.6). Our survey analysis found that a lower proportion of male BME than white male prisoners (32% compared with 45%) felt that they were treated fairly under the behaviour management (IEP) scheme. We explored these findings further in our interviews.

4.7 Each prison has its own local incentives scheme which must comply with the recently revised national incentives policy framework. The national policy framework on incentives states that those on the enhanced level of the scheme ‘may receive improved visits, which could include additional visits over their statutory entitlement, visits in better surroundings, or longer visits’ (HMPPS, 2020). Rather than seeing this as an incentive towards good behaviour or an opportunity to gain more or improved visits, prisoners often perceived this as another means of discriminating against them. One BME prisoner told us that the scheme was operated punitively [Mixed – White and Asian male prisoner, category C prison]. Others said that BME prisoners were more likely to be on the basic level of the scheme. One said that staff reacted differently to BME prisoners and were more likely to see them as threatening. In consequence, he believed that BME prisoners were more likely to be on the basic level of the IEP scheme for longer and denied opportunities like visits or jobs. [Black/black British – Caribbean male prisoner, category C prison]

Discipline

4.8 In our survey, BME prisoners were significantly more likely than white prisoners to report being restrained (18% compared with 11%) and to have experienced segregation (14% compared with 8%) in the previous six months. This was likely to restrict BME prisoners’ rehabilitative opportunities and helped explain their poorer perceptions of a rehabilitative culture (see Section 8). As one POM commented:

‘I think there’s often a higher proportion of BME prisoners in segregation or on CSIP [challenge, support and intervention plan], which means there are certain things that they cannot do that might help their rehabilitation.’ [Prison offender manager, category C prison]

4.9 In one prison, a manager felt that staff were more likely to excuse the behaviour of white men in adjudications. In the manager’s view, white prisoners were more willing to talk about their vulnerability, depression or mental health problems, which could then become mitigations, whereas black prisoners said, ‘I did it’ and were therefore more likely to get a harsher outcome.

4.10 Some BME prisoners commented on their observations and personal experience of staff:

‘Staff can be judgemental, and I always feel I am being watched. I observe negative body language in some staff. It’s predominantly BME and Traveller prisoners who get this attitude. White prisoners will get into trouble and keep their place here. Whereas BME prisoners make one mistake and go straight back to closed.’ [Black/black British – Caribbean male prisoner, open prison]

4.11 In this instance, the prisoner expresses a point that was made often by BME prisoners: the belief that white prisoners are given greater leeway and that BME prisoners will not be treated fairly. The lack of trust described by this prisoner may help to explain why BME prisoners were unlikely to refer to relationships with staff as being important to the success of rehabilitative culture, and why fewer than half of the BME prisoners we spoke to stated they were in a prison that provided a rehabilitative culture for them (see Section 8).
4.12 One BME prisoner summed up the importance of good individual relationships with staff, which were a common feature of the cases where we assessed overall rehabilitation and release planning (RRP) work to be reasonable or good:

‘OMUs have been fairly OK in the few dealings I have had. The main positives have been the Resolve programme [see Glossary of terms] and the Forward Trust – both were brilliant. It’s all about the person they give you to work with – also relationships.’ [Black/black British – Caribbean male prisoner, open prison]

Support from key workers and prison offender managers

Key workers

4.13 Key work, the first phase of the offender management in custody model (OMiC – see Glossary of terms), was implemented during 2018–19. Key work entails a prison officer being assigned to each prisoner to provide weekly support and engagement (see Section 2 for more detail on the role of the key worker). This initiative has significantly increased the time that staff can spend developing constructive relationships with prisoners. However, while key working has undoubtedly helped to improve communication between prison staff and prisoners, it is still not sufficiently effective in its objective of helping prisoners to progress through their sentence and engage in rehabilitation and risk reduction work (HMI Prisons, 2019; HMI Prisons, 2020).

4.14 Key workers are supposed to meet with prisoners weekly, or at least once every two weeks. Our adult male survey analysis suggested that staff engage with BME prisoners less than this, and less than with white prisoners. Only 35% of BME prisoners in our survey said that any member of staff had talked to them about how they were getting on in the previous week, compared with 41% of white prisoners.

4.15 In our analysis of case files, we found levels of engagement to be poor for most male BME prisoners. On average, adult male BME prisoners met less than once a month with their key worker, although there was considerable variation in the level of contact from key workers across our fieldwork sites. In three of the six male prisons, key workers had on average met with BME prisoners less than once every two months. The highest level of contact was in HMP Northumberland, where key workers had on average met with BME prisoners almost weekly. Some BME prisoners at other prisons did not know who their key worker was. Infrequent contact created anxiety; expectations were raised and then unmet, undermining trust:

‘She [key worker] hasn’t spoken to me about my sentence plan or told me how I can get on […] No-one has spoken to me about release. They say they will come in the last three months, but it’s my last two months and they still haven’t been.’ [Asian male prisoner, category B prison]

‘The key worker scheme started very high profile, lots of posters, but in reality, it doesn’t deliver and is appalling – it doesn’t get done properly – the officers feel they have to do it but they count you popping into the office as your weekly key worker interaction.’ [Black/black British – African male prisoner, category C prison]

4.16 When key work took place, it tended to focus on the practicalities of prison life such as wing tasks and completing forms, and several BME prisoners explained the value of such support to them:
Section 4. Black and minority ethnic male prisoners’ experiences of relationships with key staff

4.17 Such practical assistance was clearly valued by prisoners and could help to motivate them to engage with the prison regime and opportunities for progression. However, there was limited evidence of key workers taking the next step, which entails talking to prisoners about their rehabilitation objectives and how they can work with them to achieve them. Few BME prisoners we interviewed said their key worker was helping them with their rehabilitation and sentence planning needs. Some prisoners were confused about the purpose of key work. One prisoner summed this up when he told us that his key worker asked him how he was ‘getting on’, but no more, and he did not understand what the key worker’s role was beyond that basic welfare check.

4.18 Most male BME prisoners we interviewed said they had been treated fairly by their key worker and they frequently commented on the ‘likeability’ and decency of their key worker, but not on the effectiveness of the support they were given:

‘She’s a very good officer but has no time […] She has had so little contact with me I can’t say she’s unfair.’ [Mixed – white and black Caribbean male prisoner, category B prison]

‘He’s a lovely guy, but when it comes to getting things done, he’s not proactive […] my key worker isn’t covering the sentence plan. He doesn’t talk about that stuff.’ [Black – any other black/African/Caribbean background male prisoner, category C prison]

4.19 Key workers were therefore developing good relationships with prisoners, but they were usually not using that connection well to help prisoners to progress. Although BME prisoners reported experiencing discriminatory treatment in relation to access to activities or opportunities (see paragraph 1.8), they did not ascribe this to the key workers with whom they had personal contact. Most BME prisoners said they were unaware of being treated differently to others by their key workers and some were positive about their key worker.

4.20 There was evidence of effective key work with BME prisoners in only a small number of cases in our sample. It was notable how positive prisoners were in these cases. Effective relationships appeared to be built on trust, professional working relationships and proactive and positive reinforcement. For example, one prisoner described his key worker as being on his side. He said he had proper meetings with her and saw her role as ‘to help me out with things’, to sort out requests and help with his sentence plan. [Asian/Asian British – Pakistani male prisoner, category C prison]

4.21 One prisoner described how his key worker worked proactively with his POM to source release on temporary licence (ROTL) opportunities. He said his key worker was well-informed about the possibilities and was therefore in a good position to support him with release plans, including securing accommodation.

Prison offender managers

4.22 POMs had low levels of contact with BME prisoners. On average male BME prisoners in our sample had only met with their POM approximately twice in the previous six months instead of the weekly contact envisaged by the OMiC model (see Section 2). Even when there had been contact, our case file analysis concluded that only about a third of male BME cases demonstrated proactive and purposeful contact from the POM at the level that inspectors considered necessary for that case.
4.23 The insufficient amount of contact was reflected in the comments of prisoners we interviewed; for example, one described his POM as ‘invisible’, while another told us that he had ‘never received a sentence plan’ and did not know his POM’s name or even what ‘OMU’ (offender management unit) stood for. This prisoner was a wheelchair user and was concerned about what arrangements would be in place for him on release [Mixed – white and black Caribbean male prisoner, category B prison]. Another prisoner said the POM just ‘checked everything was ok and that was that’ [Black/black British – Caribbean male prisoner category B prison]. In some cases, we were concerned at how prisoners had been judged negatively without evidence of significant staff efforts to engage and help them. One BME prisoner’s OASys (see Glossary of terms) stated he had ‘a complete lack of motivation’ [Mixed – White and Asian male prisoner, category C prison]. However, his records showed there had been little contact between the prisoner and his POM or key worker, little discussion of the prisoner’s rehabilitation or resettlement needs and no evidence of a serious effort being made to develop a relationship with and help motivate the prisoner. His current POM told us that the prisoner had been ‘completely failed by the prison’.

4.24 Many other prisoners commented that poor contact with their POM was impeding their progress:

‘I don’t think there is an effective process for helping people move forward. I feel like a lot of the staff […] are not really interested.’ [Mixed – white and black Caribbean male prisoner, open prison]

4.25 In some cases, support came too late:

‘I haven’t had any support. I applied for cat D and they said it was too early. The second time I applied they said I hadn’t done my courses, and when I showed them I had they said it wasn’t worth it because I only had a few months left’. [Asian – any other Asian background male prisoner, category B prison]

4.26 As with key workers, although male BME prisoners described a poor level of contact with their POM, most did not judge them badly. Over three-quarters of those we interviewed said they had been treated fairly by their PMOs. However, there were evidently some frustrations as well as low expectations about the role. For example, one prisoner told us that their POM spoke to them ‘nicely’, but ‘did not get anything done’ [Black/black British – Caribbean male prisoner, category C prison]. In another case, a prisoner said his POM was ‘definitely fair’, despite there being little contact between him and his POM, or evidence of work done to support him. [Black/black British – African male prisoner, category B prison]. As with key workers, pressure on POMs’ time was clearly a factor in the poor level of contact they were able to provide. One prisoner said his POM was generally good, but very busy. He believed that she cared, but that he did not see her often enough to build a proper working relationship. [Asian – any other Asian background male prisoner, category C prison]

4.27 In another case, we concluded that contact with a prisoner had not been good enough and that there was little focus on RRP from the POM. Although disappointed by the level of contact with his POM, the prisoner did not think this was unusual, or that he was treated differently from other prisoners.

4.28 In our survey, of the 50% of male BME prisoners who reported that they had a sentence plan, only 44% reported that any member of staff helped them to achieve objectives or targets, a significantly lower proportion than white prisoners (57%). In several cases, sentence plan targets focused exclusively on BME prisoners behaving well in prison with no reference to wider progression. There was some difference in reporting between minority groups. Asian prisoners were more likely than all other BME prisoners to report in our survey that staff were helping them achieve their sentence plan objectives (53% compared with 41%) although few cited positive examples in our interviews.
4.29 Where we identified instances of POMs working effectively with prisoners, as with key workers, it was notable how positively prisoners reported. Good relationships appeared to be founded on frequent contact, which helped to develop a good level of trust. One prisoner said his POM gave him ‘positivity’ and he said he ‘trusted his advice’ [Black/black British – African male prisoner, category C prison]. Empathy, a proactive nature, delivering on promises and providing encouragement were important factors in several cases:

‘Even when I made a mistake on my ROTL paperwork he was brilliant and sorted it out for me. I can talk to him about anything and I see him quite regularly.’ [Black/black British – Caribbean male prisoner, open prison]

‘When I first came here she was in the reception waiting to meet me, not all of the OMU officers do that. I can sit down and talk to her when I have more personal issues. But she also talks to me about my sentence plan and things like getting a job.’ [Asian/Asian British – Bangladeshi male prisoner, open prison]
Section 5. Black and minority ethnic male prisoners’ experiences of rehabilitative work

Summary

5.1 In our survey, BME prisoners reported more negatively than white prisoners across a range of family support questions, and few felt they were encouraged by staff to maintain important relationships. In our interviews, prisoners described the benefits of in-cell telephones in maintaining relationships but were concerned about the high cost of phone calls and what some felt was the discriminatory impact on family contact of incentives and earned privileges (IEP) schemes.

5.2 BME prisoners were more likely to report completing offending behaviour programmes than white prisoners. Most BME prisoners we spoke to who had completed the programmes said they had been helpful. There was some evidence that ethnicity may have created a barrier to effective treatment and rehabilitative work.

5.3 In our survey, a higher proportion of BME than white prisoners said they needed help with release planning, but a lower proportion said that someone was providing such help. Few BME prisoners said they found it easy to access education, training and employment opportunities in prison, although Asian prisoners were more positive than others. BME prisoners who had undertaken education, training and employment were more likely than white prisoners report that the experience would help them on release. BME prisoners reported reasonably good access to release on temporary licence (ROTL) opportunities and found them helpful in maintaining family ties and supporting education, training and employment opportunities in the community.

5.4 BME prisoners were less likely than white prisoners to say that it was easy to get access to purposeful activity but more likely to say they were actually taking part in it. They were also more likely to feel that they had benefited as a result of the activity.

BME prisoners’ access to family support

5.5 Our survey showed worse perceptions among BME prisoners than white prisoners about several aspects of contact with families. A lower proportion of BME prisoners said that staff at the establishment had encouraged them to keep in touch with their family and friends (29% compared with 37%); a higher proportion of BME prisoners reported having problems contacting their family when they first arrived (34% compared with 29%); and a lower proportion said they could use the phone every day (86% compared with 92%).

5.6 In our fieldwork, it was clear that the benefits of in-cell phones were much valued by prisoners, but the cost of calls hindered family contact:

‘The in-cell telephone is the most important thing. I ring my wife every night and my children every two nights’. [Arab male prisoner, category C prison]

‘The main problem is the cost of making phone calls, some people can’t afford it and all the money they earn goes on the phone. Some people live a long way away and have trouble travelling.’ [Asian British – Bangladeshi male prisoner, open conditions]
Section 5. Black and minority ethnic male prisoners’ experiences of rehabilitative work

5.7 In our survey a lower proportion of BME prisoners felt that they were treated fairly under the prison’s incentives and earned privileges (IEP) scheme than white prisoners (32% compared with 45% - see ‘Rehabilitative work, incentives schemes and disciplinary procedures’ in Section 4, and Section 2). As a prisoner’s IEP level often determines the number and type of visits they can receive, some prisoners in our interviews explained that this in turn diminished their opportunities for family contact (see paragraphs 4.6 and 4.7).

Addressing offending behaviour and criminogenic needs

BME prisoners’ access to offending behaviour programmes

5.8 In our survey, only 51% of male BME prisoners (similar to white prisoners) said their experiences in prison had made them less likely to offend in the future and this figure was reflected in our fieldwork analysis. An algorithm incorporated into the OASys process (see Glossary of terms) assesses whether work done with the offender has reduced their risk of reoffending. Risk had only been reduced in half of the assessed cases in our fieldwork sample. An OASys had not been completed or reviewed in the last 12 months for almost a fifth of male BME prisoners.

5.9 HM Prison and Probation Service (HMPPS) equalities monitoring data shows that male BME and white prisoners are similarly likely to complete offending behaviour programmes. BME prisoners comprised 24% of programme starts and 25% of completions; white prisoners comprised 76% of starts and 75% of completions (Ministry of Justice, 2019).

5.10 Our survey also found that a higher proportion of BME prisoners said they had completed an offending behaviour programme than white prisoners (55% compared with 47% – see paragraph 5.2). More than half of the BME prisoners interviewed during this thematic review stated that they had completed some form of intervention during their sentence. This included not only accredited offending behaviour programmes, but also interventions such as victim empathy or drug and alcohol work. Of the interviewed prisoners who had completed a programme, most reported that it had been helpful. For example:

‘TSP [Thinking Skills Programme] presented me with options on how to lead my life. These options were always there but I didn’t know they were there […] now I see that I should have made better choices.’ [Black/black British – African male prisoner, category C prison]

‘Resolve [see Glossary of terms] was brilliant – I’ve still got my folder in my cell and when I’m feeling under the weather I remember techniques we were taught to use, such as meditating. It has helped to create a new me. The Resolve teachers were enthusiastic. I think I am a different person now to when I came into prison.’ [Black/back British – Caribbean male prisoner, open prison]

‘I did TSP and found the groupwork discussions useful to gain other people’s perspectives […] it helps you manage the stress you are feeling and understand the impact your imprisonment has on your family.’ [Black/black British – African male prisoner, open prison]

5.11 Although it was positive that most BME prisoners found offending behaviour programmes to be helpful, other factors could undermine their ability to resettle successfully in the community, illustrating the importance of a coordinated resettlement support package to reduce the risk of reoffending. Accommodation was a particular concern for some BME
prisoners we spoke to. For example, in the final example above, the prisoner was likely to be homeless on release (see also paragraphs 5.23 and 5.24).

5.12 Moreover, POMs told us that just over half of the BME prisoners they were working with had not completed the interventions which had been identified as necessary before release. One of the common reasons offered was that the prisoner refused to engage with services that might help them. We found some evidence that BME prisoners experienced additional barriers to effective treatment, which meant that they were less likely to be encouraged to engage in rehabilitative work to reduce reoffending. The following case illustrates the point. The prisoner’s POM stated:

‘He [the prisoner] is within three months of release. He has not completed BBR [Building Better Relationships] or Kaizen [programmes to work with individuals convicted of a sexual offence] – both of which he has been assessed as suitable for before release. He has not received the necessary psychological support or input whilst he has been here […] he should have been encouraged and motivated to engage in programmes with psychology and get proper 1-1 support. It’s likely that because of his culture he hasn’t engaged in things which encourage him to open up about his past or his feelings. He has said he will self-refer in the community but it isn’t really good enough.’ [Asian – any other Asian background male prisoner, category C prison]

5.13 The POM reported that she believed his ethnicity had influenced his access to rehabilitation and release planning (RRP):

‘The culture that he is from has inhibited him from accessing psychological support. Given his ethnicity, his family have been very disappointed in this offence and the shame on the family has been great. His reluctance to open up and engage with services stems from his cultural identity and background.’

5.14 The POM had assessed that ethnicity was a factor in his willingness to engage in positive rehabilitative work; as a result, she had done some one-to-one work on cultural identity with him, which explored family attitudes and cultural heritage, which was positive. The POM felt this helped to better understand the prisoner’s motivation to engage with services. However, the overall quality of RRP work with this prisoner was not sufficiently good. The interventions and psychological support that he needed before release had not been completed, and his access to rehabilitation services remained limited.

An intervention designed for BME prisoners

5.15 Ministry of Justice research suggests that treatment that is ‘culturally aware, sensitive and inclusive; that is delivered by culturally aware and sensitive staff; and [is] delivered by staff from similar ethnic backgrounds to their clients’ (Shingler and Pope, 2018: 2) is more likely than treatment that did not centre this approach to engage BME participants. The assessment states that such interventions are more likely to overcome any fear or resistance associated with feeling isolated or misunderstood (see paragraph 2.8). BME-specific programmes therefore appear to be a promising means of improving rehabilitative services, although, in practice, most BME prisoners depend on mainstream, larger, white majority services, which therefore need to focus on being responsive.

5.16 At HMP Isis, we found an intervention – ‘Changing the Game’ – designed specifically for high risk young black prisoners, which linked work on cultural identity with desistance from violent offending. The research which led to the programme’s creation found that black men who adopted gang culture had high levels of unaddressed trauma. ‘Changing the Game’ is a therapeutic group intervention that works to improve engagement with black men who have experienced trauma, either from involvement in violence or from adverse childhood
experiences. The programme promotes basic skills for controlling emotions and impulsivity, and basic cognitive skills to think in ways which will support more positive aims and objectives for participants. A whole prison approach is supported by a staff training component, ‘Game Changers’, which covers topics such as trauma, culture and unconscious bias. The project had been independently evaluated with positive early findings regarding the impact on both prisoners’ behaviour and staff awareness (Theobold and Corson, undated). We interviewed a prisoner at HMP Isis who had completed the course and was able to describe examples of his learning. The prisoner’s file showed proactive RRP work and that he had been given useful support to help him to avoid offending on release.

5.17 Managers told us they did not feel that the approach to rehabilitation had previously taken enough account of groups other than white males and were enthusiastic about the positive contribution that ‘Changing the Game’ had made to redress this balance. During our group meeting with a group of six senior managers, one commented that, ‘[W]e don’t even have the language within the organisation to understand how to rehabilitate black men’ and that for HMPPS, ‘[T]he idea of creating culturally competent programmes is completely alien’. Managers told us that prison was the end point for many young black men who have experienced the impact of disproportionality from school onwards, and that the prison had the exceptionally difficult task of trying to ‘undo disproportionality’ that is longstanding.

5.18 The managers went on to say that young black men would not ask for mental health support and that staff were ‘concerned at a general lack of engagement from BAME young men. They have vulnerabilities, but they are much less likely to seek help’. The managers felt that ‘Changing the Game’ was addressing these concerns.

BME prisoners’ experience of release planning

5.19 In our survey, of those BME prisoners who expected to be released in the next three months, a higher proportion said they needed help on release with finding employment than white prisoners (72% compared with 61%), as well as help to access education and training (57% compared with 46%). However, a lower proportion said that someone was helping them prepare for release (50% compared with 59%).

5.20 Not all BME prisoners within three months of their release date had resettlement plans. In our fieldwork, inspectors found that few release plans for BME prisoners were of adequate quality. Not all areas of need were covered in sufficient detail and actions were more likely to be deferred for the prisoner themselves ‘to address upon release’.

5.21 About half of the male BME prisoners we interviewed felt that resettlement and offender management support had not been sufficiently useful. Timing of services and staff lacking knowledge of prisoners’ individual needs emerged as concerns:

‘The resettlement help is too late and doesn’t give me a good chance to continue good stuff I have done here.’ [Any other ethnic group male prisoner, category C prison]

‘[… it wasn’t easily accessible […] no-one has really looked at my needs here.’ [Arab male prisoner, category C prison]

Finance, benefit and debt

5.22 In our survey, 19% of BME prisoners reported having money worries when arriving at their prison. Of those who expected to be released in the next three months, 69% reported that they would need help with arranging benefits and 61% needed help sorting out finances. In
our fieldwork, BME prisoners who said they needed help with finance, benefit and debt reported that there was limited support within establishments; most had been told to sort this out themselves after release. Prisoners described money worries related to concerns such as outstanding fines, loans and unpaid rent:

‘I am still getting letters from my council telling me I have outstanding debts. I have not received effective help to tackle these debts. I have still got that burden on my shoulders after release.’ [Black/black British – Caribbean male prisoner, category C prison]

Accommodation

5.23 In our survey, of those BME prisoners who expected to be released in the next three months, 63% stated that they needed help with accommodation on release. However, only a third of this group said they had received help. In our interviews, of the BME prisoners who had received support with accommodation before release, only a small number reported that this was helpful. Uncertainty about potential homelessness was causing stress, ill-health and concern about reoffending:

‘The problems with trying to find an address are affecting my health, causing me anxiety and my psoriasis to flare up.’ [Black — any other black/African/Caribbean background male prisoner, open conditions]

‘I will be homeless on release […] It’s my main concern and the only reason I contacted resettlement services. I feel stressed because I don’t know what will happen on release.’ [Black/black British – Caribbean male prisoner, open prison]

‘I’ve reoffended three times before, to put clothes on my back, food in my belly and a roof over my head. All they’ve done so far is tell me they’re making an appointment to see someone, but I’m getting out soon.’ [Asian/Asian British – Bangladeshi male prisoner, open prison]

5.24 In our survey, a lower proportion of Asian prisoners reported that they needed help finding accommodation on release than all other BME prisoners (49% compared with 67%).

5.25 Obtaining relevant data about accommodation outcomes was sometimes difficult. At all prisons, we found little use of rehabilitation or release planning data broken down by ethnicity to help identify and address concerns. This was partly because relevant data was rarely collected or collated, and partly because, when it was, it was held in a variety of locations – by prison managers, agencies working in the prison or centrally by community rehabilitation companies (CRCs) – and not shared. In one of the visited prisons, information on any accommodation outcomes had not been known to prison managers until shortly before our visit, and only following criticism at a previous full inspection; this critical information had been held by the CRC but was neither proactively provided nor adequately pursued by the prison.

Education, training and employment

5.26 In our survey, BME prisoners were less likely than white prisoners to say that it was easy to get a prison job at their current establishment (40% compared with 53%), take part in vocational or skills training (31% compared with 39%) or in education (59% compared with 63%). In our interviews, some BME prisoners elaborated:
’BME prisoners are treated differently in terms of access to jobs, ROTL and the speed of getting to open conditions […] the working out wing […] has more white prisoners on it as they get all the jobs over BME prisoners.’ [Asian male prisoner, open prison]

’A lot of time you put in for something and won’t get it, but someone who has just arrived will get it and the only difference is that they are not Pakistani.’ [Asian/Asian British – Pakistani male prisoner, category C prison]

’A lot of the Asians and blacks don’t get the jobs they choose, they always get the prison issued jobs. The white prisoners will often get their own jobs approved.’ [Asian/Asian British – Pakistani male prisoner, category C prison]

’Deep down I think I’ve been treated differently […] it can be harder for minorities, like getting good jobs […] can’t help but think it [i.e. race] has something to do with it.’ [Black/black British – Caribbean male prisoner, category C prison]

5.27 The last two quotations allude to what appears to be a deep-seated problem: even if a list of prison jobs broken down by ethnicity were to show no disproportion, these respondents are unlikely to be convinced of equity. They feel that there is a systematic bias which means that BME prisoners are conditioned to take whatever job is available, while white prisoners have choices. This is not a problem that can be solved simply by sharing monitoring statistics, useful though this is. Prisoners may disregard information that does not chime with their personal experience unless they feel they can trust the people delivering it and the institutional commitment to equality.

5.28 Some BME prisoners clearly did not feel this trust and felt unable to complain about their experiences:

’In work there’s a huge bias, and minority prisoners don’t get the paid jobs, and if you complain it falls on deaf ears.’ [Asian/Asian British – Bangladeshi male prisoner, open prison]

5.29 It was notable that while BME prisoners experienced disadvantage in accessing activities, they were also more likely to report participating in them. In our survey, BME prisoners were more likely than white prisoners to say that they had undertaken education (83% compared with 77%) and vocational or skills training (68% compared with 63%) at their current prison. Of those who had completed education and work at the prison, BME prisoners were more likely than white prisoners to report positively about this experience. For example, a higher proportion of BME than white prisoners reported that education (67% compared with 60%), vocational skills or training (69% compared with 63%), voluntary work outside of the prison (60% compared with 50%) and paid work outside of the prison (67% compared with 56%) could help them on release. Black prisoners were more likely than all other BME prisoners to report that the education they had completed would help them on release (81% compared to 64%).

5.30 Our fieldwork supported the survey findings about positive experiences of work and education. Over three-quarters of BME prisoners we spoke with said education, training and employment support had been helpful:

’When I first came in, I couldn’t write properly and had no idea about computers. I’ve since did about 15 courses on computers, spreadsheets and photoshop and improved my writing.’ [Black – any other back/African/Caribbean background male prisoner, open prison]

’I’ve been doing charity work since I got here, I started as a driver’s mate and moved to other roles like the warehouse […] and customer services, and they have asked me to
come back and work for them when I’m released.’ [Black/black British – Caribbean male prisoner, open prison]

Release on temporary licence (ROTL)

5.31 The enthusiasm to progress was reflected in our findings on ROTL. In our survey, a significantly higher proportion of BME prisoners said they had accessed ROTL than white prisoners (24% compared with 19%). In our fieldwork, the vast majority of BME prisoners who were eligible for ROTL had accessed it. Most spoke about how beneficial ROTL was for maintaining family ties and others told us how they had used ROTL for education and employment. For example, one prisoner was using ROTL to attend college and another had recently used ROTL to attend a job interview, which he hoped would lead to employment. One prisoner summed up the benefits of ROTL for his efforts towards rehabilitation:

‘I am eligible and have had many ROTLs. It’s amazing, it’s actually proper rehabilitation. It is the only positive experience I have had while in prison.’ [Mixed – any other Mixed ethnic background male prisoner, open prison]

5.32 Of the BME prisoners we interviewed who had accessed ROTL, the majority reported that the experience of applying for this had been straightforward. A few felt that denial of ROTL was the result of discriminatory treatment. One prisoner felt that he had received different treatment to white prisoners:

‘I think I should get ROTL. I also think I’m eligible for cat D, but they told me it wasn’t worth it because I only had a few months to serve, but there are others who go with less time to serve – and they are all white’. [Black – any other black/African/Caribbean background) male prisoner, category B prison]
Section 6. Black and minority ethnic women prisoners’ experiences of relationships with key staff and rehabilitative work

Summary

6.1 In our survey, BME female prisoners reported similar experiences to white female prisoners in most areas, including relationships. However, they were more negative in some areas, notably in relation to levels of victimisation from staff and access to activities. In our interviews, BME women tended to report more positively than BME men about relationships with key staff. Although the key working element of the new offender management in custody model (OMiC, see Glossary of terms) was paused in women’s prisons in March 2020 as a result of the COVID-19 pandemic, one of the sites (HMP Bronzefield) had implemented an interim model of key work and case management for some prisoners (HMPPS, 2018). BME women prisoners had adequate contact with prison offender managers (POMs), although it was not sufficiently focused on rehabilitation or release planning (RRP). Fewer than half of BME women prisoners said that staff were supporting them to achieve their sentence plan objectives. BME women reported positively about the resettlement support they received from community partners.

6.2 Most BME female prisoners could maintain regular contact with their family and friends, although family intervention work did not always account for cultural needs.

6.3 Release on temporary licence (ROTL) was not used often and some prisoners reported frustration at a prolonged and over-complicated application process. Few female BME prisoners reported that their offender management and resettlement needs had been met.

Relationships with staff, including key workers and prison offender managers

6.4 In our survey, 71% of female BME prisoners said that most staff treated them with respect, which was not significantly different from white female prisoners. However, 49% of BME prisoners said that they had experienced some form of victimisation from staff compared with 34% of white prisoners. We further explored these findings through our interviews with prisoners and staff.

6.5 The key working element of the new OMiC model is not compulsory in women’s prisons (HM Prison and Probation Service, 2018), but one of the visited women’s establishments (Bronzefield) had implemented key working for some prisoners. Although some prisoners had not yet been allocated a key worker, those who had and had already met with them spoke about them positively. For example, one woman spoke of the value of her key worker listening to her and checking on her welfare. When commenting on the importance of communication, another mentioned that ‘[prisons] should not undervalue the importance of face to face contact’ [Mixed – any other Mixed ethnic background female prisoner].

6.6 POMs had sufficient levels of engagement with female BME prisoners. On average female BME and white prisoners in our sample had met with their POM approximately four times in the previous six months, double the frequency in men’s prisons. In our case file analysis, we found that contact with female prisoners was generally meaningful, but that it was not often
focused on RRP. In our survey, only 44% of female BME prisoners said they had a sentence plan. Of this group, only 47% said that they were being helped to achieve their sentence plan objectives.

6.7 As with male BME prisoners, most female BME prisoners in our sample felt that they were treated fairly by their POM and many said that the help they received to progress through their sentence had been at least reasonably good. Some of these prisoners gave specific examples of how POMs had helped them to identify and address their individual needs. One prisoner said that her POM had ‘pushed [her] straight away’ to get onto courses relevant to her sentence plan [Black/black British – Caribbean female prisoner]. Another said that her POM had ‘made a massive difference […] got the ball rolling [and] helped my journey massively’ [Mixed – white and black Caribbean female prisoner]. One mentioned that her POM had helped to source a counsellor post-release and had helped her to avoid future reoffending [Mixed – white and black Caribbean female prisoner].

6.8 However, most female BME prisoners considered the contact and support with release planning from their prison’s Offender Management Unit (OMU) to be poor. Where BME female prisoners were critical of the help they were given to progress through sentence, they often described an absence of contact or a lack of relevant support. One prisoner said that while she got along with her POM, the latter did not focus discussions on what the prisoner would do on release, which was her biggest anxiety. Others described having no OASys (see Glossary of terms), delays in recategorisation and a general lack of knowledge from their POM about their individual circumstances. One prisoner felt that prison staff had become desensitised to prisoners, who were ‘palmed off’ without individual consideration of their circumstances [Black/black British – Caribbean female prisoner]. In some cases, these concerns led prisoners to conclude that discrimination was causal:

‘Sometimes [I] feel like white prisoners are given priority with housing. It comes across as black people are an afterthought. Some prisoners have very swift access to families. Things get sorted for white prisoners really quickly.’ [Black/black British – African female prisoner]

Support from community agencies

6.9 Several external agencies regularly provided rehabilitation and resettlement support that was valued by BME women prisoners. Some of these agencies had a base at the prison, while others visited as and when required. Prisoners reported positively about these services and said that they had filled gaps left by the lack of contact with prison staff.

- Two prisoners told us that in the absence of support from their POMs, they had received useful help from the ‘Changing Lives’ charity (see Glossary of terms) to help them prepare for release. These prisoners said they felt they had to rely on the Changing Lives representative to fulfil offender manager responsibilities [Asian – any other Asian background and Asian/Asian British – Pakistani female prisoner].

- ‘Muslim Women in Prison’ (MWIP) was frequently mentioned by prisoners. MWIP provides cultural and language support to prisoners in addition to through-the-gate services to help with resettlement. MWIP had produced a culturally informed resettlement programme which supported Muslim women in rebuilding their lives post-prison release and back into the community.

- Hibiscus Initiatives (see Glossary of terms) provided rehabilitation and resettlement support specifically for BME women, including advocacy services for BME refugees and foreign nationals. It targets support to those who may be marginalised by
language and cultural barriers. The charity also helps people transition from prison or immigration detention into the community in the UK or other countries.

- Other agencies providing useful services to women prisoners in general were LEAP (see Glossary of terms), which delivered support with education, entrepreneurial training and mentorship, and the St Giles Trust (see Glossary of terms) which provided prison and community-based support for people in the criminal justice system.

Maintaining important relationships with family and close friends

6.10 In our interviews, most BME women reported that they could maintain contact with family and friends. In prisons with in-cell telephony, prisoners were positive about how helpful this was to family contact: 90% of those responding to our survey reported being able to use a phone every day.

6.11 Where BME female prisoners reported that their ability to maintain relationships with family and friends was poor or not good enough, they tended to cite long delays in phone numbers being added to their PIN phone accounts, which meant they could not quickly call their families or friends. Family intervention work was also cited as a gap and prisoners reported a lack of awareness about courses even when available; one [Mixed – white and black Caribbean female prisoner] said she had been at the prison for two years and only recently found out that there was a parenting course. Only one BME prisoner in our sample had undertaken family intervention work. She spoke of positive support provided by the dedicated family engagement officer, who helped her to maintain good communication with her social worker (Mixed – white and black Caribbean female prisoner).

Release planning

Sentence progression and release on temporary licence (ROTL)

6.12 In our survey, 23% of female BME prisoners reported having access to ROTL, but few of those we interviewed had actually undertaken periods of ROTL. Prisoners complained about delays in the system and a complicated application process. One prisoner described how she felt she was made to ‘jump through hoops’ while her final release date was approaching, thus minimising the value of ROTL prior to release [Black British – Caribbean female prisoner]. She had applied for her ROTL two months before the earliest date she could take it. Her application was not considered until a month after the due date. She was told that she needed to complete assessments and give permissions which took several weeks more to complete. Another prisoner [Asian British – Pakistani female prisoner] said that while she knew her ROTL eligibility date, she did not know she needed to apply for it and was surprised that it had not happened automatically.

6.13 More than half of the POMs that we interviewed agreed with prisoners and did not feel that ROTL had been accessed and used appropriately in their cases. In some instances, this was explained by the ROTL application paperwork not being returned in time by the prisoner; where this had happened, it was not clear how POMs had encouraged and supported prisoners. In other cases, there was not a satisfactory explanation.
More than half of the female BME prisoners in our interview sample did not feel their ethnicity had impacted on their experience of rehabilitation and release planning, but there were significant exceptions. Potential immigration problems were a serious hindrance to progression for some prisoners and had a direct impact on their ability to take advantage of rehabilitative services. One prisoner [Black/black British – African female prisoner] we spoke to had been of interest to the Home Office, but her immigration status had been resolved with the help of her POM. However, the fact that her status in the UK had at one time been in question continued to affect her access to services and, it appeared, may have contributed to her not being able to progress to open conditions and use ROTL before release.

Despite the Home Office confirming that she was not of interest, she felt the issue had followed her around and that she could not shake it off. For example, she reported that she attended a resettlement fair to look for help with finding a job but was told that she was unable to get help because of her immigration status. She referred to her ethnicity as ‘blocking my help’ and she felt ‘branded by [my] colour’. She reported that she felt discouraged as a result and was less motivated to help herself with rehabilitation. Her POM agreed with her and contrasted her treatment with that of her co-defendant sister, who was a British citizen:

‘The issue with immigration […] has served to label her during this sentence and it must have been really hard for her. She will have seen her sister progress [to an open prison], getting ROTL, working and seeing family. Whereas she is now still here, unable to do these things. It has stopped her getting the help she needs.’

Despite being a low risk prisoner and demonstrating good behaviour in custody, progression had been delayed and overall RRP outcomes for the prisoner were poor.

Addressing offending behaviour and criminogenic needs

About half of POMs thought that prisoners had received the necessary interventions before release. Many staff felt the lack of course availability and sentence lengths were a barrier to accessing interventions. About half of the female BME prisoners in our fieldwork sample had completed one or more interventions during their sentence and it was positive that all found them to be helpful. Prisoners had completed interventions such as courses about substance misuse, domestic violence, victim awareness and psychology-delivered interventions.

In our interviews a minority of BME female prisoners said the support they received to address their offending behaviour was helpful. We found the offer of support was too often made too late. For example, a prisoner who had many repeat experiences of custody and was assessed as high need in several areas, was soon to leave prison with some practical tasks such as housing applications and registering for universal credit incomplete. The plan was for such tasks to be completed by the prisoner on her release, which was unlikely to support a good transition from custody to community and maximise the chances of reducing the likelihood of reoffending.

Assistance with education, training or employment was more positive. Over three-quarters of female BME prisoners reported needing support, and of those who did most stated the support was helpful. About half of female BME prisoners in our sample also reported needing support with finance, benefit and debt management. However, few found the support received to be helpful.

Only a small number of female prisoners in our sample had a recorded reduction in the risk and likelihood of general or violent reoffending post release. Risk had increased for some prisoners, and it did not appear that interventions had effectively addressed the offending
behaviour and rehabilitation needs. We encountered several examples where by the time that release planning had commenced, outstanding offending behaviour needs had not been addressed. For example, one prisoner was deemed to be high risk and due for release within a month of our visit. She had outstanding offending-related needs, including fire setting and emotional well-being, with no plans to address them before release [Mixed – white and black Caribbean female prisoner].
Section 7. Gypsy, Roma and Traveller prisoners: identification, relationships with key staff and rehabilitative work

Summary

7.1 A key finding from our fieldwork was that GRT prisoners were routinely misidentified: this finding was replicated in all types of prison. GRT prisoners were more likely to report needing help to get in touch with family and friends while in custody than other prisoners. There was little strategic focus on this issue in prisons. Most GRT prisoners found programmes to be helpful. At some sites, it was positive that interventions were responsive to the needs of GRT prisoners.

7.2 Female GRT prisoners were more likely than other female prisoners to have complex needs and to have experienced bullying/victimisation from other prisoners, and more likely to report feeling unsafe. All female GRT prisoners felt that completing other programmes and one-to-one work would help them on release.

Identifying GRT prisoners

7.3 The intention of this thematic review was to explore the rehabilitation and release planning (RRP) experiences of minority ethnic prisoners, including BME prisoners and those from GRT backgrounds. However, it became clear that prisons were unable to routinely and reliably identify Roma prisoners. Prisons were using the ethnicity code ‘W3- Gypsy or Irish Traveller’, but there was no systematic means of specifically identifying Roma prisoners. We selected our interview sample based on the prison’s identification of people as being GRT. Only one prisoner identified by the prison told us they had Roma heritage. Consequently, our interview findings were mostly limited to Gypsy and Traveller prisoners. We eventually identified seven male and two female GRT prisoners for interview.

7.4 In our surveys, 96% of prisoners who said they were ‘White-Gypsy or Irish Traveller’ also described themselves as fitting the GRT category. However, only 48% of those who identified themselves as GRT in a separate question (completed by the same prisoners) described themselves as ‘White-Gypsy or Irish Traveller’. We could not establish why there was such a variance in the figures, but one potential explanation, which requires further exploration, is that there is a substantial and under-identified group of prisoners who consider themselves to be Roma.

7.5 Moreover, we found that most of those recorded by prisons as Gypsy and Traveller prisoners were routinely misidentified. For example, at one prison, 110 prisoners were recorded as being Gypsies or Irish Travellers (8% of the overall population). However, when we randomly selected 10 of this group for interview, none were from such a background. Prison managers thought that this had followed a positive initiative by staff to encourage prisoners to use the electronic kiosk service to identify themselves to the prison if they had GRT heritage. For reasons that were unclear, many prisoners wrongly recorded themselves as having GRT heritage. The fact that this had not been noticed until our visit suggested that there had been little purpose to collecting the ethnicity data in the first place, regardless of accuracy.
7.6 We also identified GRT prisoners who were not recorded as such by the prison, which is a more common finding during inspections. Reasons given by prisoners for non-disclosure included a fear that identification would lead to discrimination, self-imposed cultural pressure and a concern of bringing shame on their community.

7.7 As total numbers of GRT prisoners were small, this chapter incorporates findings from both male and female GRT prisoners. We interviewed seven GRT men and two GRT women.

GRT prisoners’ experience of relationships with key workers and prison offender managers

7.8 During our fieldwork we found that levels of contact between key workers and prisoners from a GRT background were comparable to those of prisoners from other ethnic groups. Most of the prisoners we interviewed felt that they had been supported reasonably well by their key worker, mainly in relation to practical day-to-day assistance, and all felt that their key worker was fair. Despite this, recorded contact from key workers could be infrequent and some prisoners in our sample had only met their key worker two or three times in the previous six months, much less than we would expect to see.

7.9 Levels of contact between prison offender managers (POMs) and prisoners from a GRT background were slightly lower than for prisoners from other ethnic groups and some GRT prisoners had just a single recorded contact in six months. One prisoner told us:

'It is very rare that you see OMU staff – I last saw my offender supervisor on the wing in passing – we do need more contact with our offender supervisor (OS) – the more contact, the better'. [White – Gypsy or Irish Traveller male prisoner, category C prison]

7.10 Our case file review found little evidence of POMs giving positive or proactive support to Traveller prisoners to progress through their sentence. Most of the recorded contact was cursory and focused on practical activity, such as filling in forms. Despite this, most of the GRT prisoners we interviewed were positive about the support from their POM, and all felt their POM was fair. The disparity between perceived and actual support suggested low expectations of the support available or that GRT prisoners were not fully aware of the role of the POM.

Encouraging GRT prisoners to access services

7.11 A range of interviewed staff, including specialist support workers and prison managers, told us that distrust of officials was a characteristic of GRT prisoners, and they often cited a fear of interference in Traveller community and culture. They felt that this meant that these prisoners were often reluctant to discuss with them what they would do on release and tended to say they did not need help, as they were more likely to rely on family and community contacts. This was supported by some of the GRT prisoners we spoke with.

7.12 In one prison, a GRT prisoner representative told us that poor literacy and embarrassment at asking for help meant that access to activities and rehabilitation support for this group of prisoners was more limited. Another interviewed prisoner highlighted the impact of literacy problems:

'I've not seen any discrimination since I've been here. Some of the Traveller boys might miss out because they can't read or write, but that's it.' [White – Gypsy or Irish Traveller male prisoner, category C prison]
7.13 At HMP Northumberlander, while literacy had been a problem for some GRT prisoners wanting to access programmes, the prison had put in place support plans for those needing additional help and they also ran an 'adapted TSP [Thinking Skills Programme]' for those with learning difficulties and literacy problems.

7.14 GRT prisoners appreciated the opportunity to meet together as a group. At one prison, such meetings had lapsed several months previously because the member of staff who had facilitated them had moved jobs. Prisoners felt that little was done to acknowledge GRT cultures, for example through celebrations at the time of the popular and much anticipated Appleby Horse Fair. This event is an annual gathering of around 10,000 Gypsies and Travellers, which attracts 30,000 visitors (https://www.applebyfair.org/). A GRT prisoner representative at the same prison told us that he felt 'rehabilitative culture' meant encouraging a feeling of belonging, 'you have to feel like you are wanted'. In order to achieve this, he said that prisoners needed to know what was happening in the prison and that it was there for them too. He felt his role was to help other prisoners to access resources and therefore to be more a part of rehabilitative culture.

7.15 It was clear that what is usually regarded as being part of equality and diversity work, such as forums to aid communication, mutual support and efforts to recognise and celebrate cultures, could feed directly into a rehabilitative culture where prisoners should feel valued and respected. This point also applies to BME prisoners (see Section 8 and paragraph 9.3). The GRT representative we spoke to said that he felt that rehabilitative culture was undermined for the large number of GRT prisoners by the loss of the GRT group and the fact that there was only one GRT prisoner representative who was largely confined to one wing. These things did not support the view that the prison was taking GRT prisoners' distinct needs seriously enough. While there was no evidence that they were being actively excluded from individual RRP services, and indeed some had been helped to complete programmes, their distinct cultural needs appeared undervalued and communication was poor.

7.16 At HMP/YOI Isis, Irish Travellers were generally engaged in education or training and felt the prison supported them well through the chaplaincy department (and the Irish Chaplaincy in particular). They had regular group meetings organised by the chaplaincy, where they could ask questions, obtain practical help and connect to others with the same cultural background. The Irish Chaplaincy had facilitated communication between Travellers and prison managers on some occasions, helping them to feel supported and engaged.

7.17 At HMP Wormwood Scrubs, HMP Bronzefield and HMP/YOI Isis, the Irish Chaplaincy ran regular groups for Irish Travellers. These were mainly social occasions, where prisoners could talk together, listen to Irish music and play DVDs. We also found that the Irish Council for Prisoners Overseas (ICPO) was working with prisoners at these establishments and offered support in relation to visits, family work, health, legal matters, discrimination, ill-treatment and resettlement needs. Both ICPO and Irish Chaplaincy staff in London told us they would refer prisoners with a resettlement need to the Traveller Resettlement Project.

7.18 The Traveller Resettlement Project was set up in April 2019 to target what was described by the project worker as ‘a marginalised, difficult-to-engage group who have high rates of recidivism and have largely been ignored and discriminated against by the Criminal Justice System’. She offered pre- and post-release mentoring and support, including in meetings with the probation service, job centres and drug/alcohol rehabilitation services. She worked in five London prisons, but said the work was most advanced at HMP/YOI Isis, which was the only prison where she had succeeded in engaging well with POMs and key workers and had attended pre-release meetings:

‘[this] made a considerable difference in terms of my ability to prepare and plan support for a very vulnerable prisoner’s release. This man had been in prison for six years, does
not read or write, suffers from anxiety and depression and has a learning disability. Prior to release a four-way meeting took place in the prison with myself, the prisoner, hisOffender Manager and CRC [community rehabilitation company] Resettlement Worker. This enabled us to construct a plan around obtaining ID documents, claiming benefits, registering with a GP to continue his medication, attending his Probation and Approved Premises Appointments and attending a Drug Rehab appointment. I attended these appointments with him and continue to support him in the community. Prior to this, the longest this man has ever been out of prison for is a week. He is currently out of prison nearly three months.'

'In terms of resettlement with this group, in some ways they have never been settled as they have never had ID documents, claimed benefits or even been registered with a GP. As many of them have experienced discrimination in prison and on release by Probation staff who sometimes view their ethnicity as a risk factor, they are reluctant to engage with authorities. Due to problems with literacy they find it impossible to undergo required courses both in prison and in the community and therefore do not progress in their sentence plans or community licenses. There are also high rates of mental health issues, self-harm and suicide in this group both in prison and the community. We can refer these men for counselling on release and are currently setting up a Self-Management Group […].'

7.19 The worker saw some Travellers ‘through the gate’ and was currently seeing two ex-prisoners twice a week in the community. She continued to accompany them to important appointments, such as with housing services, and helped them to access Irish counselling and psychotherapy services.

7.20 Outside of London, HMP New Hall had engaged an organisation called Leeds GATE (Gypsy and Traveller Exchange (https://www.nspa.org.uk/members/leeds-gate-gypsy-and-traveller-exchange/), which worked with the GRT community. Leeds GATE provided additional support such as accommodation provision, education, employment, training, finances, citizenship, social inclusion and health and well-being.

GRT prisoners’ access to family support

7.21 We found little evidence of a consistent focus on the family support needs of GRT prisoners, although some staff had made good efforts in individual cases. In our survey, 40% of male GRT prisoners and 45% of female GRT prisoners said that staff had encouraged them to maintain family ties. Sixty per cent of male GRT prisoners who were due for release in the following three months said they needed help getting back in touch with family, compared with 39% of non-GRT prisoners. Forty per cent of those who needed such help said they were receiving it. This was an even more stark concern for GRT women: in our survey, 92% of GRT women due for release in the next three months reported that they needed help to get back in touch with family or friends on release, compared with only 43% of non-GRT women. Only half of the women who needed such help said they were receiving it.

7.22 In our survey, a higher proportion of male GRT prisoners stated they had problems contacting their family on arrival than prisoners from a non-Traveller background (41% compared with 29%). One GRT male prisoner commented that the:

'[…] main problem for Travellers is if you have family who live in a caravan and can’t have a fixed line then it costs a lot to phone them on a mobile.’ [White - Gypsy or Irish Traveller male prisoner, open prison]
7.23 The 2011 census suggested that almost a quarter of Travellers lived in a caravan or other mobile or temporary structure (Office for National Statistics, 2011). Some within this community see travelling as part of their identity and regularly move around the country from site to site. Therefore, prisoners from these communities may be more likely to become disconnected from their families while in custody. In our survey, a higher proportion of male GRT prisoners also stated that they had problems with arranging care for children or other dependants than prisoners from a non-Traveller background (7% compared with 2%).

7.24 Although we were able to examine the cases of only three GRT women and interview two of them, the need for support with family relationships was a problem in all three cases. Both GRT women prisoners we interviewed described problems in maintaining contact with their families. One said she struggled with family relationships and had only seen her son once since coming to prison. She said she would welcome more support from the prison to help maintain her family ties and to try to be a better parent. The other female GRT prisoner said that she was able to keep in good phone contact with family and friends but wanted help to improve her problematic family relationships. A third female GRT prisoner declined an interview with us but her POM told us that she had a poor relationship with her family and had refused to engage with the family engagement worker. In all three cases, we found some useful support from prison staff to help meet such needs, and we assessed the overall rehabilitative work completed with them as reasonable or good. For the male GRT prisoners in our sample, we assessed overall rehabilitation-focused work, rating three as insufficient or poor, four as reasonable and none as good. GRT prisoners who we assessed to have insufficient or poor outcomes in rehabilitative work experienced very limited POM contact and had outstanding needs that had not been addressed in custody (for example, substance misuse problems). Conversely, all four GRT prisoners who had reasonable outcomes had completed an intervention, including in health and offending behaviour, and some had used release on temporary licence (ROTL).

GRT prisoners’ access to interventions

7.25 Prisoners should have access to a range of interventions while in custody to help them address their offending behaviour needs. Interventions include, for example, substance misuse treatment, psychological therapy and offending behaviour programmes. In our survey, a higher proportion of male prisoners from a GRT background stated they had completed non-offending behaviour programmes than non-Traveller populations (58% compared with 45%). All GRT prisoners we interviewed in our fieldwork had completed some form of intervention during their current sentence and most stated that these had been helpful:

‘I would recommend Resolve [see Glossary of terms] to anyone who is here for a violent offence – it is an eye opener.’ [White - Gypsy or Irish Traveller male prisoner, category C prison]

‘Sycamore Tree [a victim awareness programme] is the only course I’ve ever done that I got affected by. The mother and father of a boy who got killed came in to speak with us, and things like that really stick in your head.’ [White - Gypsy or Irish Traveller male prisoner, open prison]

7.26 Several studies have highlighted the problems that low levels of literacy create for Irish Travellers (Gavin, 2019). One GRT prisoner we spoke to stated:

‘A lot of Travellers have a problem with education, and if the prison can get them into that it can open up other opportunities for jobs. I was lucky as my dad made sure we could read and write’. [White - Gypsy or Irish Traveller male prisoner, open prison]
At HMP Northumberland, it was positive that support plans were used for prisoners who needed additional help to get through a programme, and the prison offered an ‘adapted TSP [Thinking Skills Programme]’ for those with learning difficulties and literacy problems.

Most of those GRT prisoners we spoke to had used education services and were generally positive about their experience: ‘there’s a lot of courses they can help you with and education is brilliant’. [White - Gypsy or Irish Traveller male prisoner, open prison]

In our survey, a higher proportion of male prisoners from a GRT background than other prisoner groups said that when they arrived at the prison they had a problem with alcohol (29% compared with 17%) and drugs (44% compared with 26%). Five of the prisoners we interviewed had completed drug and alcohol interventions during their sentence. One had completed ‘Changeways’, a drug and alcohol misuse awareness course which he said was helpful. [White – Gypsy or Irish Traveller male prisoner, open prison]

Our survey also found that a higher proportion of respondents from a GRT background said they had completed work outside prison, both voluntary (52%) and paid (50%), than non-Traveller prisoners (33% respectively). Similarly, most of those we interviewed had undertaken training and employment during their sentence. A higher proportion of GRT prisoners than non-GRT prisoners said they had completed one-to-one work (57% compared with 41%).

In our survey, a higher proportion of male GRT prisoners reported that they had used ROTL than non-GRT prisoners (34% compared with 19%). However, a lower proportion reported that this experience had helped them to achieve sentence planning objectives (46% compared with 69%). Of those that used ROTL for maintaining family ties, one prisoner stated, ‘it has been brilliant as my mum’s been in and out of hospital’. [White – Gypsy or Irish Traveller male prisoner, open prison]

No GRT male prisoners in our sample reported that their ethnicity had influenced their experience of RRP, and most reported that they had not felt discriminated against. To address the distinctive needs of Irish Travellers, the Irish Chaplaincy established the Traveller Resettlement Project, which appeared to be a useful targeted initiative to help meet the needs of GRT prisoners (see paragraph 7.18). We spoke with the project coordinator who felt that many Travellers she worked with needed ‘settlement’ rather than ‘resettlement’. While some were content without a consistent address, others wanted more stability but had, in her experience, often not had a fixed address to start with.

In our survey, female GRT prisoners reported similarly to other prisoners in most areas, including relationships with staff, but with some notable exceptions. For example, 71% said they had felt unsafe at some point in the prison compared with 46% of other prisoners. Although the difference from other prisoners was not statistically significant in most other areas, findings were nevertheless concerning. For example, 47% of female GRT prisoners reported that they had experienced some form of victimisation from staff while in prison and about a third did not feel respected by staff.

One prisoner described how her identity as a Traveller had influenced her experience of RRP. She felt that her individual needs were not recognised, and that she was perceived as a ‘Gypsy in trouble again’. She said she felt ‘left out and singled out’ and that her ‘identity was a
different way of life [...] it’s like you’re different and not worth anything’. She felt that her ethnicity had negatively impacted her ability to access rehabilitative help, stating that she felt officers expected her to misbehave because of her background and did little to recognise the positive changes she made [White – Gypsy or Irish Traveller, female prisoner]. When asked about the prison providing a rehabilitative culture another prisoner stated:

‘[...] absolutely not. Because of the relationships, the lack of respect and the way people make you feel disregarded and not noticed.’ [White - Gypsy or Irish Traveller, female prisoner]

7.35 We asked POMs and key workers if, in their view, prisoners’ GRT backgrounds had influenced their experiences of RRP. None considered that they had.

Education, training and employment and programmes

7.36 In our survey, 81% of female Traveller prisoners felt that the education, vocational skills or training that they had gained in custody would help them when released. One GRT prisoner we spoke to had completed several courses such as Maths and English Level 1 & 2, a diploma in Hairdressing and a catering NVQ Level 1 & 2. The prisoner assessed these courses as helpful.

7.37 In our survey all female GRT prisoners who had received one-to-one work felt that it would help them when released. One GRT woman we spoke to said:

‘My OS [offender supervisor] has helped me a lot. My parole was refused in 2019 and my OS has helped me progress, so parole is possible. I’m on a specialist unit, have a kitchen job, regular appointments with Psychology and I’m enhanced now.’ [White – Gypsy or Irish Traveller, female prisoner]

7.38 This prisoner was within a month of release and it was positive that support had also been arranged in the community. The prisoner had a mental health worker and a counsellor, and the approved premises that she would live in on release had been confirmed. She had also used ROTL to visit the approved premises (AP) in the community before release and had a bank account and bank card arranged in advance. We assessed outcomes in RRP in this case to be good.

7.39 Many female Traveller prisoners needed help to sort out accommodation for release; in our survey of those who were within three months of release, 85% said they needed help but only 36% said they were currently receiving help.

GRT case study: accommodation on release

7.40 Many female prisoners we spoke to reported feelings of anxiety due to not having somewhere to live on release. One prisoner we spoke to had complex mental health needs, mobility issues and a history of substance misuse. The POM informed us that the prisoner was now engaging well with the recovery team which was a success given that previous attempts had failed. However, accommodation was the primary concern. The prisoner was within 12 months of her release date and the POM had started to discuss accommodation with probation colleagues as well as St Mungo’s (a charity providing help for homeless people) early due to the concern about the lack of provision and risk of subsequent reoffending. The prisoner told us:
'It [housing] makes me worried because I was released from here before with a tent and nowhere to go, what good is that? I feel like I’ve been set up to fail. If I go to an AP there will be other people using [drugs] there, that’s no good for me.' [White – Gypsy Roma Traveller, female prisoner]
Section 8. Ethnicity and ‘rehabilitative culture’

8.1 In our survey, male BME prisoners had consistently poorer perceptions than male white prisoners about the range of factors commonly thought to be necessary for a positive rehabilitative culture. For example, a significantly higher proportion of BME than white prisoners reported feeling unsafe, a lower proportion felt they were treated with respect by staff and a higher proportion had experienced victimisation from staff. One third of BME prisoners reported that their ethnicity had directly influenced their experience of rehabilitation and release planning (RRP). Of these, most said the impact on their experience had been high or very high. Prisoners referred to a lack of understanding about their cultural backgrounds and individual differences, the diversity of prisoners and the lack of diversity of prison staff, previous experiences of discrimination and unfair access to jobs.

8.2 Much of this review has discussed issues direct relevant to the aims of a ‘rehabilitative culture’ (see Section 2). In our survey, male BME prisoners reported consistently poorer experiences than white male prisoners across most areas of prison life, including relationships with staff, contact with family and friends, victimisation by staff, experiences of behaviour management, disciplinary procedures, complaints, time out of cell and support to achieve resettlement objectives. In some areas, the figures were especially stark. For example:

- When asked, ‘do most staff treat you with respect?’, 63% of male BME prisoners said yes compared with 75% of white prisoners.
- 50% of male BME prisoners reported victimisation by staff, compared with 40% of white male prisoners.
- 26% of male BME prisoners reported feeling unsafe compared with 21% of white male prisoners.
- Of those prisoners who made an application, when asked ‘are applications dealt with fairly?’, 45% of male BME prisoners said yes compared with 57% of white male prisoners.
- When asked ‘have you spent one or more nights in the segregation unit in this prison in the last 6 months?’, 14% of male BME prisoners said yes compared with 8% of white male prisoners.

8.3 It is also notable that male BME prisoners were less likely than male white prisoners to report personal vulnerabilities. For example, a lower proportion reported being on assessment, care in custody and teamwork (ACCT) reviews for prisoners at risk of suicide or self-harm (12% compared with 22%), having mental health problems (32% compared with 53%) or having problems on arrival in the prison with drugs or alcohol (9% compared with 18%).

8.4 Such differences were much less pronounced in women’s prisons, but there were some notable exceptions. For example, 49% of BME women prisoners said they had experienced some form of victimisation from staff, but only 44% of white women prisoners said this. BME women also reported less time out of cell than white women prisoners: 20% said they spent less than two hours out of their cells on a typical weekday, compared to only 10% of white women prisoners. BME women were also, like BME male prisoners, less likely than white
prisoners to report mental health problems, although the proportion that did was still high (59% compared with 73%).

8.5 While it was beyond the scope of this thematic to examine all of these findings during interviews, they appear to suggest that BME prisoners, especially in men’s prisons, felt more victimised and that they were treated less fairly than white prisoners. They were also less likely to report vulnerability. The reasons for this are unclear: while they may have included a reluctance to disclose information or a greater resilience, there is insufficient evidence to reach clear conclusions. However, these findings are important in themselves. They help us to understand the overall lived experience of BME prisoners, and the context in which rehabilitative work is undertaken.

8.6 In order to better understand how such findings affected prisoners’ views about the rehabilitative potential of what was offered by the prison, we asked both prisoners and staff open questions about how meaningful they felt the idea and the promise of a ‘rehabilitative culture’ was to them. Inspectors kept in mind the broad definition of a rehabilitative culture outlined by Mann, Fitzalan Howard and Tew (2018: 4) (see Section 2). This includes a prison culture that supports rehabilitation by being safe, decent, hopeful and supportive of change, where there are good relationships between prisoners and staff and where prisoners are enabled and encouraged to progress through their sentence.

8.7 While many staff felt that they were delivering a rehabilitative culture, they were defining it narrowly as progression opportunities and, unsurprisingly, felt that it was therefore most effectively delivered in open prisons. Prisoners in open conditions understood the concept of a rehabilitative culture better and described it as more meaningful than prisoners in closed conditions. Across our fieldwork sites, about two-thirds of BME prisoners we interviewed in the two male open prisons told us that they believed their prison delivered a rehabilitative culture; in the four closed male prisons, only a minority said this. There was also a marked difference in perceptions about rehabilitative culture in the two women’s prisons (see below).

8.8 We included in our fieldwork a closed prison (HMP Buckley Hall) where our full inspection findings about rehabilitative culture had been positive. We could still see strong evidence of the factors that had led to positive inspection judgements, such as encouragement of prisoners to take responsibility, a focus on hope and promotion of community and peer support. However, even here, BME prisoners we interviewed were generally negative about the idea of a rehabilitative culture and told us that experiences of discrimination negatively affected their views on the rehabilitative offer in their prison (see below).

Rehabilitative culture and prison function

8.9 Prisoners’ views on rehabilitative culture differed depending on the type of prison. In open prisons, both staff and BME prisoners’ perceptions of rehabilitative culture were more positive. Here, BME prisoners commented on the environment of open prisons. One described it as ‘safe and calm’, reporting that he could ‘look forward and not be worried about trouble from others’. [Asian – Pakistani male prisoner, open prison]

8.10 Prisoners at open prisons frequently cited the use of release on temporary licence (ROTL) as a key requirement for the success of what they saw as rehabilitative culture; there was generally little sense of how closed prisons could provide support towards rehabilitation. One prisoner commented, ‘[…] rehab culture doesn’t exist in closed conditions as it’s all about the prison regime’. The prisoner spoke about the benefits of ROTL and stated that if helped him to see his family and ‘[…] made me learn skills such as catching a train, reading a timetable and planning my day – all life skills that are important […] it makes you start doing
things for yourself.’ [Black British – Caribbean male prisoner, open prison]. Another prisoner stated:

‘The only rehabilitation is the home leave. Other than that, there is not any effective rehabilitation.’ [Asian British – Pakistani male prisoner, open prison]

8.11 Prisoner offender managers (POMs) tended to share this view. One commented: ‘the focus here is on resettlement through ROTL. There are plenty of constructive opportunities within ROTL to develop men towards release.’ [Prison offender manager, open prison]

8.12 Conversely, in category B and C prisons, BME prisoners tended to report poorer relationships, lack of safety and the lack of a productive regime. Referring to relationships, one prisoner reported that most staff did not know him ‘personally’, and they did not remember key things that were going on for him. He felt like he was ‘just another person to bang up’ and said that he often saw staff ‘laughing and joking at other prisoners’ expense’. He stated that ‘[…] the prison is about punishment rather than rewarding positive behaviours.’ [Asian male prisoner, category C prison]

8.13 Some prisoners also referred to the transactional nature of the relationships they had with prison staff: ‘staff just open your door and lock it – that’s all.’ [Asian male prisoner, category C prison]. Referring to safety one prisoner said:

‘The prison is a violent place with bullying from some staff. I don’t get much positive staff support. There’s nothing to do here.’ [Black British – Caribbean male prisoner, category B prison]

8.14 Some prisoners explained how the prison regime did little to support rehabilitative culture:

‘[…] daily priority is to keep out of trouble rather than doing anything positive; I spend a lot of time locked up, there is not much to do here.’ [Black British – African male prisoner, category B prison]

‘[…] it’s a remand centre. More like get them in, ship them on for another prison to deal with.’ [Black British – Caribbean male prisoner, category B prison]

8.15 Some staff explained why they did not see the ambition of a rehabilitative culture being realised in category B and C prisons:

‘It’s more difficult here. Not all staff are on board. For some it’s just about containing people. I understand that, it’s a violent place. But from a probation viewpoint there’s nothing here.’ [Prison offender manager, category B prison]

8.16 Another POM believed that there were notable flaws in the current practice of rewarding prisoners which prevented a rehabilitative culture being successful:

‘We should try to move away from rewarding prisoners for simply engaging in the regime. It devalues the system. We should be expecting more from prisoners than that. The system needs to work with people who are in a good place for self-realisation and rehabilitation.’ [Prison offender manager, category C prison]

8.17 Most POMs stated that they believed the prison they worked in provided a rehabilitative culture, but interpreted this concept narrowly as progression opportunities. An understanding of the broader principles of rehabilitative culture was largely absent from their accounts. For example, there was little emphasis on ‘relationships being the cornerstone of a rehabilitative culture’ (Mann, Fitzalan Howard and Tew, 2018: 8) (see paragraphs 2.15 and
Few staff stated that staff-prisoner relationships were a key requirement to the success of a rehabilitative culture.

Staff largely shared the perceptions of prisoners in open conditions. They were more likely to explain rehabilitative culture through job opportunities, ROTL and progression, which are all more visible in open prisons:

‘[…] there are a lot of opportunities to get paid employment which aids rehabilitation and progression.’ [Prison offender manager, open prison]

‘The opportunity to go out on ROTL and reintegrate into the community, particularly for those on long sentences, gives prisoners the opportunity to reintegrate back into the community in a steady and phased approach.’ [Prison offender manager, open prison]

Rehabilitative culture and experiences of discrimination

Several prisoners explained how their experiences of prejudice or discrimination affected their opportunities in the prison and their views of the fairness of prison staff, and therefore the strength of rehabilitative culture. The following prisoners appear to be saying that the prison culture cannot be rehabilitative because, before they get to know prisoners, staff distrust them because of their ethnicity:

‘When you first arrive, there is an expectation (stereotype) placed on you, and [I] have had to try really hard to counteract that. You feel like you are targeted for being black. There is mistrust towards black men and I think a difference in treatment too.’ [Mixed – white and black Caribbean male prisoner, category C prison]

‘I believe that we don’t get a fair look in. We’re looked at as aggressive if we’re animated or loud.’ [Black – any other black/African/Caribbean background male prisoner, category B prison]

One GRT prisoner compared their treatment to that of BME prisoners, indicating that black prisoners received worse treatment. They stated:

‘I don’t get insults or teased. No-one cares if you’re a Traveller. It’s not like if I were a black prisoner.’ [White – Gypsy or Irish Traveller, category C prison]

While 51% of male BME prisoners in our survey stated that their experiences in their current prison made them less likely to offend in the future, when we further explored this finding in interviews, BME prisoners were unlikely to attribute their intention to desist from offending to rehabilitative work. The factor mentioned as being most likely to keep them from returning to prison was the fear of losing their liberty and being separated from their families. One prisoner stated, ‘the main issue for me is 100% being away from my family’ [Mixed – any other Mixed ethnic background male prisoner, category C prison].

Approximately one third of BME prisoners we interviewed reported that their ethnicity had influenced their experience of RRP, and two-thirds of this number said the impact on their experience had been high or very high. There were no notable differences between responses given by prisoners from different ethnic groups. BME prisoners gave a range of explanations for why they believed they were discriminated against. The dominant themes were:

- staff having a lack of understanding about the prisoner’s cultural background
- the diversity of prisoners and lack of diversity of prison staff
• previous experiences of discrimination within the prison system and discrimination in access to jobs.

8.23 BME prisoners commonly referred to the diversity of prisoners and lack of diversity of staff, a point made strongly by the Lammy Review. Of the BME prisoners who reported that their ethnicity had influenced their experience of RRP, very few were currently held in London establishments. We visited two London male prisons during our fieldwork and four prisons in other areas of the country. Both the prisoner population and staff workforce were notably more diverse at both London establishments. Ministry of Justice data show that London is the region with the highest BME staff representation (Ministry of Justice, 2019). During our fieldwork leaders and managers informed us that the breakdown of staff and prisoner ethnicity was similar and there was a general feeling that this was helping to ‘avoid racism, discrimination, isolation and poor perceptions’ [Prison manager, London].

8.24 BME prisoners were more likely to report that their ethnicity had been a factor in establishments outside of London:

‘I think there’s a culture here where you get more opportunities if you’re white.’ [Mixed – white and black Caribbean male prisoner, South Yorkshire, open prison]

‘[…] black at the back […] staff are not well trained to understand different cultures.’ [Asian – any other Asian background male prisoner, North East, category B prison]

8.25 For BME prisoners in London prisons, the consistent reason that they gave for their ethnicity not influencing their experience of RRP was reference to multi-ethnic settings:

‘[…] it is so multicultural here. My ethnic identity has not impacted on any outcomes at all for me.’ [Mixed – white and black Caribbean male prisoner, London, category C prison]

‘[…] the community [prison and staff] here is multicultural and diverse and that makes a difference.’ [Mixed – white and black Caribbean male prisoner, London, category B prison]

‘I think it’s the same for everyone. The jail is multicultural. Everyone gets the same treatment.’ [Asian – any other Asian background male prisoner, London, category C prison]

8.26 In a very diverse open prison in the south east, one BME prisoner spoke of having worse experiences in less diverse establishments:

‘My experience here has been good – but in other prisons […] some staff are not well enough equipped or diverse enough to manage BME prisoners from an urban background. These staff then get frustrated and it makes the prisoners feel stressed out. These staff need more training to understand other cultures.’ [Black/black British – African male prisoner, south east, open prison]

8.27 Another prisoner in a London prison stated that he did not feel he had experienced any differential treatment:

‘Being a Muslim isn’t a problem. Everyone mixes well. There are lots of black and Muslim staff. [Black/black British – African male prisoner, London, category C prison]

8.28 However, the prisoner’s POM felt differently, stating ‘it’s possible that it will have influenced his RRP in some way […] if a white middle-aged, middle-class man committed the same crime, we’d be like that’s unusual, what’s going on here, let’s take a closer look.’
8.29 In another case, one POM also stated:

‘There are a lot of BME staff at all grades here. He will see familiarity at all levels and it has helped him […] this may not be the case for other ethnic groups. For Iraqi, Chinese and Romanian prisoners it may be more difficult.’ [Prison offender manager, London, category C prison]

8.30 Overall, these findings suggest that there needs to be a reimagining of what rehabilitative culture means, especially in closed prisons, and how it can be better communicated and delivered. Moreover, a frank assessment of how experiences of prejudice and discrimination affect the promise of rehabilitative culture for BME prisoners is also needed.

Rehabilitative culture in women’s prisons

8.31 Every POM we interviewed in both women’s prisons said that they felt their prison provided a rehabilitative culture. However, only about half of the BME and GRT women we spoke to said that their prison provided a rehabilitative culture. Our interviews found a considerable difference in female prisoners' perceptions between the two different sites that we visited. It was notable that experiences of a rehabilitative culture were distinctly more positive at HMP New Hall. Prisoners we spoke to commented on ‘strong relationships’, fairness, decency, encouragement and purposeful activity. One prisoner we spoke to said:

‘Here – the officers run the prison but they run it fairly; the rules are [appropriately] strict […] For example, if you don’t get out of bed or call up sick for work you get issued a warning. Staff know you well so know if you are making it up. They encourage you to get up and do things and to keep busy […] this prison is a rehabilitative one because staff have helped me to understand myself again.’ [Mixed – white and black Caribbean female prisoner]

8.32 This prisoner said she had experienced both what rehabilitation should and should not be at different prisons. During the interview she recalled feeling victimised because of her ethnicity at a previous establishment. She stated that other prisoners posted pictures of monkeys through her cell door and although she informed staff, nothing was done. The prisoner told us that this made her angry at staff and other prisoners. She was not able to think about her offending behaviour and was constantly angry because of the racism she experienced. She said she had not experienced racism since she was a child and it caught her by surprise in the prison. For this prisoner, her experiences and a lack of support from staff had had wider implications on her motivation to engage in rehabilitative work. She stated that her behaviour escalated and as a result, she was transferred to a different prison. The prisoner compared her experiences and said that at HMP New Hall, she felt she could access real rehabilitative work and had completed courses which helped her to reflect on her past. She was working positively with staff and felt that they treated her fairly, knew her well and knew how to challenge her appropriately.

8.33 Others commented on the prison atmosphere as well as relationships:

‘I am on a calm and peaceful unit with a job. Relationships are strong. Staff are very supportive of a rehabilitation culture on my unit.’ [Asian – any other Asian background female prisoner]

‘[…] the behaviour management scheme and purposeful activity works towards a rehab culture.’ [Asian/Asian British – Pakistani female prisoner]
8.34 At HMP New Hall, members of staff whom we interviewed were also more likely to refer to relationships with prisoners as being important. One member of staff stated:

‘We are able to build good relationships with prisoners and the culture allows and encourages this. We are encouraged to be open and speak to prisoners frequently.’
[Prisoner offender manager, women’s prison]

8.35 Where women were more negative about rehabilitative culture, they were more likely to speak of a lack of encouragement and poor relationships with staff. One prisoner told us that there was ‘not much challenge or encouragement from staff’ and that although some relationships were ‘okay’, she would not ‘describe them as strong or the prison as hopeful.’
[Black – Caribbean female prisoner, women’s prison].

8.36 One prisoner reported a lack of trust from staff and differential treatment:

‘Being black you always have to go the extra mile to get help. Where they see a white prisoner with issues they will be approached and help offered but with black prisoners we are not trusted and have to really prove ourselves.’ [Black/black British – Caribbean, women’s prison]
Section 9. Recommendations and notable positive practice

Recommendations

9.1 National and local HM Prison and Probation Service (HMPPS) strategies relating both to rehabilitation and release planning (RRP) and equality and diversity should consider how to increase BME and GRT prisoners’ access to the potential benefits of ‘rehabilitative culture’. The diversity of experience between different minority ethnic groups should be an explicit part of this effort. These strategies should specifically consider how to:

- increase understanding among prison staff of BME and GRT prisoners’ distinctive experiences of prison life, including the way that ethnic identity may influence prisoners’ access to and engagement with rehabilitative work
- improve prison offender manager (POM) and key worker focus on sentence planning and rehabilitation-focused work with BME and GRT prisoners
- increase BME and GRT prisoners’ access to and engagement with family support interventions
- make the concept of rehabilitative culture meaningful in all types of prison.

9.2 To identify and address potential discrimination, a wide range of data relating to activities, rehabilitative work and release planning should be systematically collected, broken down by ethnicity, shared and discussed with prisoners, and among all agencies working in prisons. This data should encompass both participation and outcomes. It should be sophisticated enough to draw out differences in experiences between different ethnic groups.

9.3 The leadership team in each establishment should develop an understanding of rehabilitative culture which is based on dialogue with different prisoner groups. The spirit and practice of rehabilitative culture should be developed around a consensus of what that concept means to the prison community in that establishment. It should frequently be discussed and reviewed with prisoners to ensure relevance.

9.4 Creative efforts should be made to better understand the distinct perspectives of BME and GRT prisoners on rehabilitation and release planning, supported by suitable specialist community groups as needed. The diverse experiences of different minority groups should be recognised in these efforts. Such work should include regular prisoner meetings that promote dialogue, discussion and mutual understanding between staff and the wider group of prisoners, in addition to smaller ‘consultation’ groups attended by representatives.

9.5 HMPPS should support the development of culturally sensitive services for minority ethnic prisoners, which are designed to meet their specific needs and recognise the importance of identity. The potential contributions of suitable specialist community organisations should be explored as part of this endeavour.

9.6 HMPPS should ensure that GRT prisoners are accurately identified so that they can be provided with culturally appropriate support and services. The contribution of GRT prisoner representatives and specialist organisation to achieving accurate identification and providing culturally appropriate services should be explored. The distinct groups covered by the
collective term ‘GRT’, including those with Roma heritage, should be distinguished in prison data and in prison policy as required.

**Notable positive practice**

9.7 At HMP/YOI Isis, Travellers told us that the prison supported them well through the chaplaincy department and the visiting Irish Chaplaincy in particular. They had regular group meetings, where they could ask questions, obtain practical help and make links to others with similar cultural backgrounds.

9.8 The ‘Traveller Resettlement Project’ offered pre- and post-release mentoring and support, including in meetings with probation staff, job centres and drug/alcohol rehabilitation services, in five London prisons. The work was most advanced at HMP/YOI Isis, which was the only prison where the worker was able to work collaboratively with POMs and key workers.

9.9 ‘Muslim Women in Prison’ (MWIP) provided cultural and language support in addition to through the gate services to help with resettlement in the women’s prisons we visited. MWIP had produced a culturally informed resettlement programme which supported Muslim women in rebuilding their lives post-prison release and back into the community. It was notable how often the work of the organisation was mentioned by both prisoners and staff.

9.10 At HMP/YOI Isis, the ‘Changing the Game’ programme was designed specifically for high risk young black prisoners, and linked work on cultural identity with desistance from violent offending. The project had been independently evaluated with positive early findings. Prison managers felt that the programme was helping to address a range of concerns that specifically affected young black men.

9.11 At HMP New Hall, it was notable that minority ethnic prisoners’ experiences of a rehabilitative culture was markedly more positive than in the other prisons we visited. Prisoners we spoke to commented on ‘strong relationships’, fairness, decency, encouragement and purposeful activity. Staff also spoke to us about the importance of good staff-prisoner relationships.
Section 10. Appendices

Appendix I: Methodology

10.1 This review draws on inspection reports and additional data collection conducted in eight establishments. Evidence from all sources was triangulated to strengthen the validity of judgements. Only establishments where we have identified notable positive practice have been named in this report; this is so that other establishments can use the information to help them develop their own services to support the rehabilitation and release planning (RRP) for minority ethnic prisoners.

10.2 The intention of this thematic was to explore the RRP experiences of minority ethnic prisoners, including BME prisoners and those from GRT backgrounds. However, it became clear when planning the fieldwork element of the review that prison establishments were not able to routinely and reliably identify GRT prisoners. Prisons were using the ethnicity code ‘W3- Gypsy or Irish Traveller’, but there was no means of specifically identifying Roma prisoners. We found one female Roma Traveller at HMP Bronzefield. But overall, this sub-group was close to invisible in the prison system. Moreover, GRT prisoners were routinely misidentified (see paragraph 7.5). Consequently, our findings are limited to interviews with Gypsy and Traveller prisoners and one female Roma Traveller.

Survey analysis

10.3 A prisoner survey is conducted as part of each HMI Prisons inspection. The purpose of the survey is to gather the views and experiences of prisoners on various elements of prison life. A combined analysis is produced on an annual basis for the Chief Inspector’s annual report. This report covers all inspection reports published within the previous year, from 1 April 2019 to 31 March 2020. As part of this review an analysis of survey data from inspections published between 1 April 2019 and 31 March 2020 was conducted.

Identifying ethnicity

10.4 The HMI Prisons inspection questionnaire asks, ‘What is your ethnicity?’ There are 18 possible answers and the response options are presented in Table 1 below. For a standard HMI Prisons ethnicity analysis, groups are categorised as BME unless they fall into the following classifications: White; White British (English/Welsh/Scottish/Northern Irish); White Irish; White Gypsy or Irish Traveller; or White other. For the purpose of specific ethnic group analysis these 18 codes were recoded to match the 5+1 point classification as follows:
Table 1: Mapping of different ethnicity categorisations

<table>
<thead>
<tr>
<th>5 point classification (5+1)</th>
<th>HMI Prisons survey ethnicity categories</th>
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| White                         | White – British (English/Welsh/Scottish/Northern Irish)  
                                  White – Irish  
                                  White – Gypsy or Irish Traveller  
                                  White – other |
| Black                         | Black or black British – Caribbean  
                                  Black or black British – African  
                                  Black or black British – other |
| Asian                         | Asian or Asian British – Indian  
                                  Asian or Asian British – Pakistani  
                                  Asian or Asian British – Bangladeshi  
                                  Asian or Asian British – other |
| Mixed                         | Mixed race – white and black Caribbean  
                                  Mixed race – white and black African  
                                  Mixed race – white and Asian  
                                  Mixed race – other |
| Chinese or other              | Asian or Asian British – Chinese  
                                  Arab  
                                  Other |
| Not stated                    | No response |

A total of 6,155 men’s and 685 women’s survey responses have been included in the ethnicity analysis undertaken as part of this review. The breakdown of responses by ethnicity classification is included in Table 2 below.

Table 2: Survey responses by ethnicity classification

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<tr>
<th></th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>4,359</td>
<td>579</td>
</tr>
<tr>
<td>All BME</td>
<td>1,796</td>
<td>106</td>
</tr>
<tr>
<td>Black</td>
<td>774</td>
<td>26</td>
</tr>
<tr>
<td>Asian</td>
<td>428</td>
<td>21</td>
</tr>
<tr>
<td>Mixed</td>
<td>431</td>
<td>48</td>
</tr>
<tr>
<td>Chinese or other</td>
<td>163</td>
<td>11</td>
</tr>
</tbody>
</table>

HMI Prisons’ inspection questionnaire also asks a specific question about whether a prisoner is from a Traveller community: ‘Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?’ This question only has a yes or no response. A total of 5,881 men’s and 643 women’s survey responses have been included in the Traveller analysis undertaken as part of this review. The breakdown of responses included is included in Table 3 below.
Table 3: Traveller figures

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gypsy, Roma, Irish Traveller</td>
<td>306</td>
<td>42</td>
</tr>
<tr>
<td>Non – Gypsy, Roma, Irish Traveller</td>
<td>5,575</td>
<td>601</td>
</tr>
</tbody>
</table>

The following comparative analysis was produced for this review:

**Men’s establishments:**
- BME prisoners (this category includes all of the non-white ethnicity classifications) compared with white prisoners
- Black prisoners compared with all other BME prisoners
- Asian prisoners compared with all other BME prisoners
- Prisoners from a mixed ethnicity compared with all other BME prisoners
- Prisoners from a Chinese, Arab or other background compared with all other BME prisoners
- Prisoners who identified themselves as being from a Traveller community (e.g. Gypsy, Roma, Irish Traveller) compared with all other prisoners

**Women’s establishments:**
- BME prisoners (this category includes all of the non-white ethnicity classifications) compared with white prisoners
- Black prisoners compared with all other BME prisoners
- Asian prisoners compared with all other BME prisoners
- Prisoners from a mixed ethnicity compared with all other BME prisoners
- Prisoners from a Chinese, Arab or other background compared with all other BME prisoners
- Prisoners who identified themselves as being from a Traveller community (e.g. Gypsy, Roma, Irish Traveller) compared with all other prisoners

Please note that we only refer to comparisons between different groups when these are statistically significant: the significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

**Prisons included**

Primary fieldwork was conducted in eight establishments between January and February 2020:

1. **HMP & YOI New Hall**, women’s establishment in Flockton, West Yorkshire
2. **HMP & YOI Bronzefield**, women’s establishment in Ashford, Middlesex, operated by Sodexo
3. **HMP/YOI Isis**, category C establishment holding men and young adults in Thamesmead, East London
4. **HMP Wormwood Scrubs**, local prison holding men in Acton, West London
5. **HMP & YOI Stanford Hill**, open prison forming part of the Sheppey cluster in Kent
6. **HMP Buckley Hall**, men’s category C training prison in Rochdale, North West England
7. **HMP Northumberland**, men’s category C training prison in Northumberland, North East England. operated by Sodexo
8. **HMP/YOI Hatfield**, category D men’s prison in Hatfield, South Yorkshire.
Appendix II: References


Council of Europe (2012) Human Rights of Roma and Travellers in Europe. Strasbourg: CoE. [See also the spreadsheet accompanying this report, Estimates on Roma population in European Countries, July 2012. Available at: https://rm.coe.int/1680088ea9]


UK Prison Population Statistics (2020). Available at: https://commonslibrary.parliament.uk/research-briefings/sn04334/